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diabetic LIVING

Just diagnosed?
TURN TO PAGE 9 NOW!

MARCH/APRIL 2018, ISSUE 74
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43

**EASY,
healthy
recipes!**

Chicken on the grill
Gluten-free baking
Plus apples, corn & more

*Let's talk
about...*

keeping your
sex life vibrant

**Kids+
parents+
diabetes**

From first days to
sleepovers to self care

SUPER-SIMPLE ONE-PAN
ITALIAN SAUSAGE BAKE
see recipe, page 57

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Pacific magazines

WEIGHT-LOSS SURGERY: EVERYTHING YOU NEED TO KNOW

Refreshing Taste, Powerful Benefits



- ⊘ Less sugar¹
- ⊘ Cranberry antioxidant²
- ⊘ Cleanses & purifies to help maintain urinary tract health³



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³ One 250 ml serve of Ocean Spray® Light Cranberry helps maintain urinary tract health when consumed daily as part of a healthy diet involving the consumption of a variety of foods.

Our 700 family farms grow their cranberries in the USA, Canada and Chile.



112 Is your T1 child's first sleepover coming up? Check out our game plan

SPECIAL OFFER

Turn to page 136 and subscribe to *Diabetic Living* to receive a two-year subscription for the price of one – that's \$47.94 for 12 issues!



26 Dining solo doesn't mean skimping on taste

FOOD

- 18 Corn** Make the most of golden kernels
- 26 Cooking for one** and on the table in 30
- 32 Gluten-free baking** From cakes to tarts – something for all
- 39 One-pan wonder** Our cover recipe
- 40 Power salads** Full of flavour and vitality
- 48 Cast-iron campfire** Head outdoors with these warming dishes
- 57 Lunch club** Antipasto on a sandwich
- 58 An apple a day** Turn this common fruit into delicious dishes
- 64 Grilled chicken** Try a new spin on everyone's favourite
- 70 Ed's healthy recipe** Fast Ed's spiced lamb
- 78 Spud of the month** Lower-carb paprika-spiced wedges? Oh, yeah!

LIVING WELL

- 80 Blood sugar swings** What's causing the chaos?
- 83 Eye spy** Why protect your eyes
- 84 Healthy eating** Why, and how, to eat for good health
- 90 Weight loss surgery** Everything to know before you start
- 94 Leaping forward** Focus on becoming the best version of you
- 96 Testing 1,2,3** Get better BGL results
- 98 Diabetes and PCOS** the most common hormonal disorder...
- 102 Between the sheets** It's time for *the talk*
- 107 Parenting special** Dealing with childhood diabetes, from diagnosis to sleepover, prevention and more
- 124 You're free to be fit**

No matter what your shape or size

- 126 Trail blazing** Start walking in nature and discover the benefits

MY STORY

- 122 A new life** Wayne says goodbye to his lower leg, but hello to hope

REGULARS

- 4 Editor's note**
- 6 You tell us**
- 9 Just diagnosed?**
- 12 Your healthy life**
- 17 Diabetes hero**
- 72 Menu plan**
- 74 Cook's tips**
- 77 About our food**
- 129 Feel better in 5**
- 134 Recipe index**
- 138 Postcards**

ON THE COVER

39 Sausage bake **90** Weight loss surgery **102** Let's talk about sex **107** Kids + parents + diabetes



124

Fierce and curvy – discover trainer Louise Green's tips to getting into exercise



37

Delicious and gluten free, too!

welcome



It's a family thing

▶▶ When your child is diagnosed with T1 diabetes, it's news that affects the whole family. In this issue we have a special feature designed to help parents cope with an event that can seem overwhelming. Turn to page 107 to find out how to best cope with the initial diagnosis, how to prep your child for a sleepover (they don't need to miss out on the fun!) and how to take care of yourself at the same time. There's also a story from Dr Kate Marsh about safeguarding kids against T2 diabetes, which, sadly, is on the rise.

Weight loss surgery is a set of procedures that is becoming increasingly popular in the fight against obesity and T2. If it's something you're considering, take a look at our report on page 90,

which explains the different options and what to expect. Spoiler alert – it's not necessarily a quick fix.

And, of course, we've got plenty of deliciously simple and healthy food in this issue, too. I know I'll be cooking up our sausage bake cover star (p39) – before moving on to gluten-free baked goodies (p32).

If you're considering a camping holiday over Easter, you'll want to pack our campfire recipes (p47) along with your sleeping bag and insect repellent. And if you love the familiarity of chicken, you'll love our fresh take on this perennial favourite – turn to page 64. Enjoy!

Alix

Alix Davis, Editor

JOIN US ON...

Need more inspiration to eat well and exercise? You'll find more great recipes and loads of ideas on our website.



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NEXT
ISSUE ON
SALE
5 APR

TALK TO US TODAY!

We'd love to hear from you!

We want to share your stories, answer your questions, and share the love with other readers. Email us at diabeticliving@pacificmags.com.au

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Diabetes Australia and JDRF are proud to support *Diabetic Living*. While all care has been taken in the preparation of the articles in this magazine, they should only be used as a guide, as neither Pacific Magazines nor Diabetes Australia is able to provide specific medical advice for people with diabetes or related conditions. Before following any health advice given in this magazine, please consult your healthcare professional. Recipes that are gluten free or have gluten-free options have been approved by Coeliac Australia.



BEWARE OF IMITATIONS.

STILL THE ORIGINAL. STILL THE BEST.



You tell us

Here's where you have your say, tell others your stories and give feedback on your magazine

"I'M WORKING ON FACING THE FACTS"

I received my Nov/Dec issue

and it came at a time I really needed it.

I loved the words from Daniel Finney.

I really felt his pain. I am about 10kg

overweight at present and, after reading

this, I'm hoping he has spurred me on.

Good luck Dan, and thanks for sharing.

'When it's time for insulin' made

me feel more confident about

getting up the courage to

go to my doctor and

diabetes educator,

as I know I'm being

very foolish by

continually putting

off appointments.

I'm three months

overdue for my

check-up as I know

the outcome and I'm

scared to accept that my

next step is insulin.

Thank you again for your wonderful magazine, I've got something out of each and every issue. My husband enjoys it also, although he's not diabetic.

Annette, Vic

STAR
LETTER



Probable cause?

I have diabetes 2, controlled by exercise, diet and weight control for some 10 years, but have had a 'frozen shoulder', *plantar fasciitis* – possibly due to diabetes, hearing loss and eyesight problems. And what is tissue glyco-sylation? I have

the feeling if I see a full list of diabetes-related conditions, it may strengthen my resolve to keep it under control for as long as possible.

Kevin, NSW

**Kevin, we hear you. Look out for a feature by Dr Sultan Linjawi in an upcoming issue.*

'The real truth about healthy food'

Thank you Robert (Qld) for sharing your limerick and looking at type 2 diabetes with a humorous twist. We know it's different for everyone, but here's Robert's pithy take on his condition:

*In my kitchen, I'm a 'king' of cuisine,
cooking meals that on TV I've seen.
I have taught all my kids how to check
saucepan lids –
As [indeed] I had taught my first queen.*

*With her high-domed electrical skillet,
she would take a fine steak and, well, kill it.
I'd be done to a turn – one shade
short of a burn,
and then pick up my plate and, well, fill it.*

*But what was the good of all that?
When I ended up chubby, then fat.
I thought it was good, to eat leftover food –
'stead of feeding it all to the cat! [...]*

*I was a comforting thought. But I know
that my waistline continued to grow.
Then my guts gave me trouble, as they
tended to wobble,
whenever I limped to and fro!*

*I don't ask you to be sympathetic,
nor to tell me my whinge is pathetic.
There was just no excuse, for my
'good food' abuse –
it's my own fault I'm type 2 diabetic!*

Send your letters to diabeticliving@pacificmags.com.au



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PACIFIC MAGAZINES PTY LIMITED

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Reproduction Printed by Webstar Print (ABN 58 000 205 210) at Unit 1, 83 Derby Street, Silverwater, NSW 2128. Distributed in Australia by Gordon and Gotch Australia Pty Ltd (ACN 088 251 727). Distributed in New Zealand by Gordon and Gotch New Zealand (CRN 1540329). Published six times a year by Pacific Magazines Pty Ltd (ABN 16 097 410 896). For competition entries, please use the address supplied. Title and trademark DIABETIC LIVING® reg US Patents Office, Canada and Australia, by Meredith Corporation. Use of trademark is strictly prohibited. Recommended and maximum price \$7.99 (NZ \$9.20) including GST. All content © 2017 Pacific Magazines Pty Ltd, all rights reserved. Reproduction without permission is prohibited. All prices and information are correct as at the time of printing. Prices quoted are recommended retail prices and may vary. All material sent to *Diabetic Living* (whether solicited or not) will not be returned. Unless otherwise agreed beforehand, all rights including copyright in such material is assigned to Pacific Magazines upon receipt and Pacific Magazines may use or sell the material in all media worldwide in perpetuity without further consent or payment. *Diabetic Living* does not accept or assume responsibility for such material.

Pacific magazines
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OUR EXPERTS

Dr Kate Marsh

**Dietitian and
diabetes educator**

Kate, who has type 1, is in private practice in Sydney.
nnd.com.au

Christine Armarego

Exercise physiologist

At her clinic, Christine focuses on exercise as a way to improve BGLs. theglucoseclub.com.au

Dr Sultan Linjawi

Endocrinologist

A diabetes specialist, Sultan has a clinic in Coffs Harbour, NSW. drsultanlinjawi.com

Dr Janine Clarke

Psychologist

Janine is in private practice at Mend Psychology and The Sydney ACT Centre. mendpsychology.com.au

Dr Gary Deed

General practitioner

Gary, who has type 1, is devoted to helping people with diabetes. He is in practice in Brisbane.

Danielle Veldhoen

Podiatrist

Danielle works at Flinders Medical Centre, South Australia.

Dr Angus Turner

Ophthalmologist

Angus directs Lions Outback Vision, providing specialist eye-care services to remote areas of WA. outbackvision.com.au

Elissa Renouf

Type 1 parent

Elissa is the owner of Diabete-ezy and a mum of four kids with type 1. diabete-ezy.com

Cupid's Undie Run

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WITH YOUR UNDIES ON!



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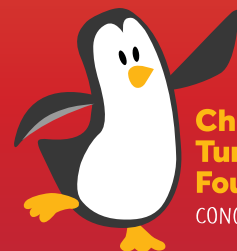


Apollo Jackson
Magician, Musician,
Bachelorette contestant
and CTF Ambassador

Neurofibromatosis (or NF), is a life-threatening genetic disorder that affects one in 2,500 Australians. By joining us for Cupid's Undie Run, you can help us conquer NF and support families living with it. Run in your undies, or fancy dress!

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Tumour
Foundation**
CONQUERING NF

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BONDS

THORN
GROUP LTD

acer

JUST diagnosed

START
HERE

A diagnosis of diabetes can be scary at first – don't panic, we're here to help

DIABETES 101

Getting your head around "diabetes lingo"? Read on...

- **When should I test my blood glucose levels (BGLs)?** This varies depending on the type of diabetes and your medication, but possible times include before meals, two hours after eating, before bed, before you exercise and if you're feeling unwell.
- **What should my BGLs be?** As a guide, if you have type 1 diabetes, a healthy target to aim for is 4-6mmol/L before you eat, and 4-8mmol/L two hours after starting a meal. If you have type 2 diabetes, aim for 6-8mmol/L before meals, and 6-10mmol/L two hours after starting a meal. Ask your doctor or Credentialed Diabetes

Educator for more guidance.

- **What's mmol/L?** It stands for millimoles per litre of blood, and is how BGLs are measured.
- **What's HbA1c?** It's your average BGLs over a period of 10-12 weeks and, used in conjunction with the blood glucose monitoring you do yourself, paints a picture of your blood glucose management. Your doctor will arrange a HbA1c test every three to six months.
- **What's a hypo?** It's when BGLs drop below 4mmol/L. A hypo can make it hard to concentrate, so some activities (like driving) aren't safe, and it needs to be treated quickly using specific foods. Only people who take insulin or some types of glucose-lowering tablets are at risk of a hypo.
- **Will I have to use insulin?** Yes, if you have type 1. But 50 per cent of people with type 2 will also need insulin six to 10 years after being



diagnosed, because the pancreas produces less insulin over time.

- **What's pre-diabetes?** It's when BGLs are higher than normal, but not high enough for a type 2 diagnosis. Lifestyle changes can delay or prevent pre-diabetes from becoming type 2.

Food myths for PWD*...

It's my sweet tooth!

It's not that simple. While type 1 is triggered by genetics and unknown factors, type 2 is caused by a mix of genetics and lifestyle factors. One of those is being overweight, but it's not just sugar that causes that. Plus, if you are overweight, that's only a risk factor, not a direct cause of type 2.

*That's People With Diabetes

No more chocolate!

False. As long as chocolate, or other foods containing added or natural sugars, are eaten as part of a healthy meal plan or combined with exercise, people with diabetes can definitely still enjoy them in moderation. Talk to your GP or dietitian for more info.

Ugh. A 'special diet'

Not really. These days 'healthy eating' for people who have diabetes is no different to the 'healthy eating' guidelines recommended for the general population. You don't need to prepare separate meals or buy special food – the recipes in *DL* are designed for everyone. ➤

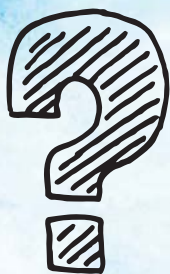


TYPE 1 AND TYPE 2...

What's the difference?



Losing just 5% of your body weight can have a positive impact.



● **Type 1** is an auto-immune condition caused by a combination of genetics and unknown factors. It accounts for 10 per cent of all diabetes, and occurs when the body's immune system destroys the cells in the pancreas that produce insulin, the hormone that's vital for converting glucose into energy. People living with type 1 diabetes need to use insulin to reduce the level of glucose circulating in their blood.

● **Type 2** is caused by a combination of genetics and lifestyle factors. It accounts for 85-90 per cent of all diabetes, and is a progressive condition where the body becomes resistant to the normal effects of insulin, or where the pancreas slowly loses its ability to produce enough of the hormone – both of which leave too much glucose in the blood. Lifestyle modifications or medication (and sometimes both) are used to manage type 2 diabetes.

Take this to heart

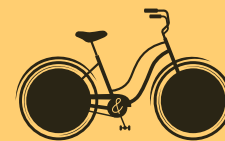
1 YOU'RE NOT ALONE

About 280 Aussies develop diabetes every day – one person every five minutes. And for every four people diagnosed, someone else is living with diabetes but doesn't know. The longer diabetes goes undiagnosed, the more it can impact your overall health.



2 IT'S YOUR MOVE

Continuing or starting regular physical activity will help lower your short- and long-term BGLs and can also help certain diabetes medications work more effectively. Plus, along with a healthy diet, losing weight – as little as 5 per cent of your body weight – can also have a positive impact.



3 WE'RE HERE

Wondering where to start? Combined with advice from your healthcare team, you've made a great first step. In this (and every!) issue of *Diabetic Living*, you'll find practical, helpful advice, expert responses to questions that might sound familiar and a whole heap of healthy recipes. ■

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heels



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YOUR healthy life

From heart attacks to cold feet, vital body matters for your consideration



BUT IS IT A HEART ATTACK?

Diabetes makes a heart attack feel different than the way it feels to a person without diabetes. A study in the UK found PWD, aged between 40 and 90, didn't consider the discomfort felt in their chest to be a heart attack. The same goes for the associated pain: they didn't consider it to be severe enough. As diabetes damages your heart and the nerves in many ways, a PWD is likely to feel less pain from a damaged heart muscle, resulting in the lack of known heart attack symptoms (such as the crushing pain in the chest). If you or someone you know is having a heart attack, **call 000**. If you are feeling any kind of chest pain, do not ignore it – visit your GP today.

NUTS FOR OMEGA-6

While there are many science-backed eating habits you can take on board to prevent diabetes, new research suggests you could significantly reduce the risk of developing type 2 through foods that are rich in omega-6 fatty acids, such as walnuts.



Less soft drink per week can reduce weight gain, compared with those who didn't change their 'soda habits'.



BALANCE: THE AUSTRALIAN WHOLEFOOD COOKBOOK
by Guy Turland & Mark Alston
HarperCollins, \$39.99

With more than 180 healthy and easy recipes by YouTube cooking sensation Guy Turland, this book encourages you to eat for energy, vitality, wellness, wellbeing and the flavours of fresh Australian produce.



Blogs to get on board with

● **DIABETES UK** (blogs.diabetes.org.uk)

Following the motto 'Know Diabetes, Fight Diabetes', Diabetes UK shares the personal experiences and views of people living with diabetes, or who live with someone with diabetes, on its blogs. Offering separate blogs for type 1, type 2, research and fundraising, they cover everything you need to know.

● **DIABETES.CO.UK** (diabetes.co.uk/blog)

Run by a global community of bloggers, diabetes.co.uk offers life hacks, and exercise and nutrition tips to motivate you to take care of your health as a person living with type 1 or type 2.

● **KATE'S SWEET SUCCESS** (kates-sweet-success.blogspot.com)

Starting the blog as a way to keep on track with her diabetes, Kate also writes to encourage and assist people with diabetes – and educating those who are not diagnosed – to not give up and to live a happy life.



BLEND AWAY!

Fruits that were blended in a NutriBullet 600 – particularly fruits that were high in fibre – showed an equal glucose response to fruits consumed whole.

This study, recently published in *Nutrition & Diabetes*, concluded that blended fruit consumption did not have a negative impact on blood glucose, as fruit juice consumption does.

BAD ODDS ON THE HEART

PWD are three times more likely to die from heart disease than someone without diabetes. Further, PWD are also six times more likely to have a heart attack.



Q&A ASK ELISSA

My seven-year-old son was diagnosed with type 1 diabetes six months ago and, although he is doing well health-wise, I am struggling to stay positive. Do you have any advice?

Elissa says: The way that we, as parents, interact with our children with diabetes will deeply affect the way they will manage their condition.

Try to only speak positively about diabetes; if they hear negativity they may feel self-conscious. With positivity and encouragement comes confidence, acceptance and determination. You will find this will have a lasting effect, not only on your child, but also on your whole family and the way they look at diabetes for the rest of their lives.

For more tips and advice, turn to page 107 for our Parenting Special. ➤

Elissa Renouf is the owner of *Diabete-ezy* and mum of four kids with type 1. Her range of convenient diabetes products is available at diabete-ezy.com



Email your questions to:
diabeticliving@pacificmags.com.au
Post: *Diabetic Living*, Q&A: Health,
GPO Box 7805, Sydney, NSW 2001.

75%

of participants in a survey conducted by Capilano Honey did not know how many serves of vegetables their 9- to 11-year-olds should be eating. Findings also concluded more than one in 10 Aussie parents have nutritional anxiety due to an overload of conflicting recommendations.

ONE MEAL PLAN AT A TIME

Early-childhood educators and care providers have access to a free menu-planning tool to help tackle obesity. FeedAustralia – developed by Healthy Australia, and the experts at the University of Newcastle and Hunter New England Population Healthy – is easy to use and full of many healthy meal and snack ideas to help lower the rate of obesity in Australia. For more information, visit feedaustralia.org.au.

WEEKLY
Meal plan:

breakfast lunch dinner

OBESEITY COSTS V ELECTRICITY



Diabetes Queensland revealed the cost of obesity is twice as much as the cost of electricity in the state alone. Yearly, obesity costs Queenslanders **\$11.6 billion** – through sick days, doctors' bills, hospital and health expenses etc – which, across the state's population, is a burden of **\$2375 per person**.

Support & Care

Credentialed Diabetes Educators are your go-to recognised and qualified specialists in diabetes education and care.

If you are looking for a Diabetes Educator, look for the ADEA trademark below. It's the mark of the Australian Diabetes Educators Association, and it's your assurance that your diabetes educator is very knowledgeable and has received the best training to help you to understand and manage your condition.

ADEA also supports research that helps people with diabetes to live well every day, through its research arm, the ADEA Diabetes Research Foundation.



HELP DIABETES RESEARCH TODAY

Please support this great work by buying a ticket (or multiple) in the ADEA's fundraising lottery. Just \$2 buys you a ticket to help fund research that helps 1.7 million Australians with diabetes to live well every day. There are fantastic prizes to be won, including:

1st Hyundai Accent Active

2nd 65-inch Premium LCD Smart TV

3rd 120,000 Qantas Points

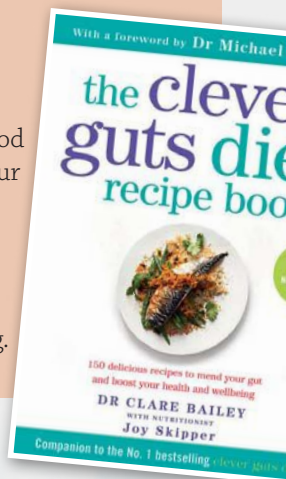
To get your tickets, and for T&Cs, visit RAFFLELINK.COM.AU/ADEA



Prize shown is indicative only.

THE CLEVER GUTS DIET RECIPE BOOK by Dr Clare Bailey with nutritionist Joy Skipper Simon & Schuster, Australia, \$35

Whether you want to boost your mood or immune system, cut the sugar cravings or lose weight naturally, this cookbook – based on 'real' food – will become your go-to guide for maintaining a healthy gut, and physical and mental wellbeing.



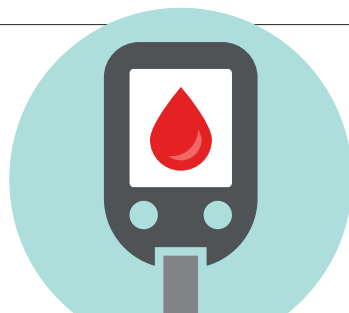
Future diagnosis predicted

Researchers at Harvard University may help to predict whether women – even those with no signs of the disease – may develop diabetes in the future. The test, called **lipoprotein insulin resistance**, was found to be more accurate than the traditional measures of family history, body mass index and blood glucose levels. ➤

your healthy life

Nearly twice as likely

A US study of more than 190,000 participants found that young people – aged five to 20 – who were taking medication for their mental health were nearly twice as likely to be diagnosed with type 2 diabetes.



SHOULD TESTING BE MANDATORY?

With higher rates of overweight and obese children in regional Queensland than in the capital, experts say Queensland regional emergency rooms should conduct mandatory type 2 testing to not only help save lives but also millions of dollars. Similarly, a trial of mandatory diabetes test conducted in western Sydney found **47 per cent** of all patients admitted to the emergency department had either diabetes or pre-diabetes.

84%

HIGHER RISK

People with diabetes are at higher risk of developing postoperative cognitive dysfunction such as a loss of intellectual functions

– **thinking, remembering and reasoning** – than someone who is not a diabetic. The study, conducted by the American Society of Anesthesiologists, found most findings were predominantly in older patients.

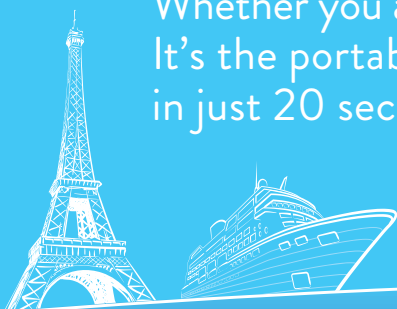
2 in 3 people

in a survey of 2000 obese Australians aged 25–49 believed they were only overweight. One in 10 thought they were of average weight. ■

WORDS ELLIE GRIFFITHS
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It could save your sight, or your life



Queensland pharmacist *Nancy Griffin* is helping raise diabetes awareness one test at a time

▶ Pharmacist Nancy Griffin knows what it's like to be diagnosed with diabetes. She discovered during her second pregnancy that she had gestational diabetes. "I was at a cafe drinking a milkshake when I received the call, so I was pretty sad that it would be my last treat for a long while," says Griffin. "I immediately started stressing about all the daily testing, potential medications, extra appointments and meal planning I would have to do."

Now, the owner of the Boyne Tannum Discount Drug Store on the Queensland central coast is urging her community to be tested for diabetes. In her town of just over 5000, there has recently been a decrease in exercise rates and

an increase in people who are overweight or obese, both of which contribute to the risk of diabetes. "There's probably a lot of undiagnosed people with diabetes walking around in my community," says Griffin.

Diabetes Australia estimates that up to 500,000 Australians are living with undiagnosed diabetes. Although you can't change your age, you can control your diet and the amount of exercise you do. "Changing the habits of a lifetime is hard work, but that doesn't mean we should stop trying," says Griffin, whose

diabetes ceased when she gave birth. "I still try to eat well and exercise more than I used to, even if I don't have to prick my finger five times a day anymore."

Discount Drug Store pharmacists have recently begun to offer free glucose tests. People who are over 40, overweight, have a family history of diabetes, have had gestational diabetes, think their diabetes is getting out of control, or are worried that they have symptoms of diabetes, should take advantage of this test.

"It's much better to know for certain whether you have diabetes than walking around blindfolded worrying about the possibilities," says Griffin.

With an early diagnosis, you can prevent your organs from becoming at risk of damage from excess sugar in your bloodstream, which can also lead to other chronic diseases. "If I can get that person to the GP for diagnosis and an early treatment plan which improves their outcomes and quality of life, I believe I have done a good job as a pharmacist," says Griffin. ■

WHAT DOES THE GLUCOSE TEST INVOLVE?

The pharmacist will take a small blood sample from your fingertip and, using a blood glucose monitor, determine the level of glucose present in your body, which can indicate your risk of developing type 2. Griffin says, "The best times to get a useful blood glucose sample are first thing in the morning before eating anything, or two hours after a meal."



food in focus

5 WAYS WITH *Corn*

**SWEET GOLDEN
KERNELS HAVE SO
MUCH TO OFFER**

How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 1860kJ,
protein 43g, total fat
11.2g (sat. fat 3.1g),
carbs 38g, fibre 11g,
sodium 607mg
• Carb exchanges 2½
• GI estimate low
• Gluten free

GF

**CHICKEN AND
CORN NACHOS**

A new take on a
pub-food classic.
see recipe, page 24 >>

GFO LC

CREAMY CRAB AND CORN BITES

Elegant appetisers with a
satisfying contrast
in taste and texture.
[see recipe, page 24 >>](#)

NUTRITION INFO

PER SERVE 337kJ,
protein 6g, total fat
2.2g (sat. fat 0.3g),
carbs 8g, fibre 3g,
sodium 221mg
• Carb exchanges ½
• GI estimate low
• Gluten-free option
• Lower carb

CORN, PUMPKIN AND FETA FRITTERS

PREP TIME: 20 MINS

COOK TIME: 30 MINS

SERVES 4 (AS A LIGHT MEAL)

500g piece pumpkin, peeled
and deseeded, chopped
1 cob corn, husk and silk removed,
kernels cut off
100g reduced-fat fresh ricotta
40g reduced-fat feta, finely chopped
2 Tbsp chopped dill
2 Tbsp polenta (cornmeal)
2 Tbsp wholemeal self-raising flour
or gluten-free self-raising flour
2 x 60g eggs, lightly whisked
Freshly ground black pepper
1½ Tbsp extra virgin olive oil
1 Lebanese cucumber, peeled into
ribbons using a vegetable peeler

1½ cups rocket leaves, to serve
Lemon wedges or balsamic glaze,
to serve

1 Cook pumpkin in a steamer basket over a saucepan of simmering water for 7-8 minutes or until just tender. Transfer to a medium bowl and roughly mash. Set aside for 10 minutes to cool.

2 Add the corn, ricotta, feta, dill, polenta, flour and eggs to the pumpkin. Season with pepper. Mix until well combined.

3 Heat 2 tsp of the oil in a large non-stick frying pan over medium heat. Add four ¼ cupfuls of the mixture to the pan (to make 4 fritters). Cook for 3 minutes or until bubbles appear on the top of

the fritters. Carefully turn over and cook for a further 2 minutes or until cooked through. Transfer to a large plate, cover loosely with foil and set aside. Repeat in two more batches with the remaining oil and fritter batter, making 12 fritters in total.

4 Divide fritters between serving plates. Toss cucumber and rocket, and place on plates. Serve with a wedge of lemon or drizzle the salad with the balsamic glaze.

COOK'S TIP

You can replace the dill with parsley or basil and the rocket leaves with spinach or mixed salad leaves. ➤



NUTRITION INFO

PER SERVE 1110kJ, protein 13g, total fat 13g
(sat. fat 3.3g), carbs 20g, fibre 6g, sodium 236mg

• Carb exchanges 1½ • GI estimate medium

• Gluten-free option • Lower carb

GFO

LC



CORN, VEGIE AND BACON MUFFINS

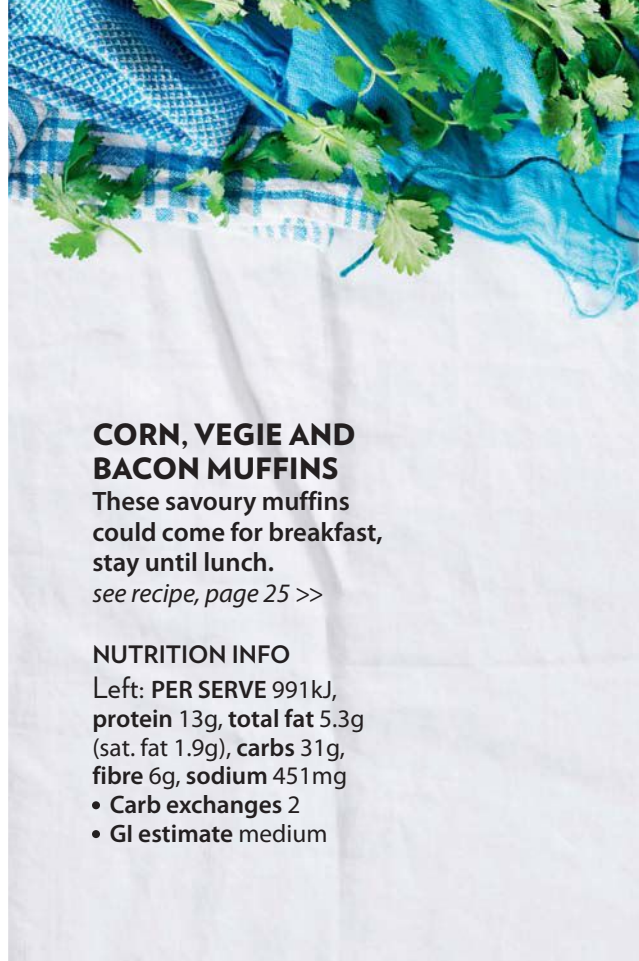
These savoury muffins could come for breakfast, stay until lunch.

see recipe, page 25 >>

NUTRITION INFO

Left: PER SERVE 991kJ, protein 13g, total fat 5.3g (sat. fat 1.9g), carbs 31g, fibre 6g, sodium 451mg

- Carb exchanges 2
- GI estimate medium



GFO

ROASTED EGGPLANT, CORN AND PARSLEY SALSA WITH FISH

A fresh and lively approach to seafood.
see recipe, page 25 >>

NUTRITION INFO

Right: PER SERVE 1890kJ, protein 42g, total fat 10.4g (sat. fat 2.5g), carbs 43g, fibre 8g, sodium 516mg

- Carb exchanges 3
- GI estimate low
- Gluten-free option



Good for you

A versatile and tasty vegetable, corn can be cooked and served in many ways. Try steaming, boiling, barbecuing and stir-frying; remove the kernels to add texture to salads and salsas, or eat straight off the cob!

● Like many vegetables, corn is rich in fibre, potassium, thiamin and niacin, and also in low glycaemic carbohydrate to give you sustained energy.

● Frozen and canned corn is often just as good as fresh. If choosing canned corn kernels, be sure to choose no-added-salt varieties.

NUTRITION INFO **GF**

PER 100g (approximately half a large cob) 432kJ, **protein** 4g, **total fat** 2.1g (sat. fat 0.3g), **carbs** 14g, **fibre** 6g, **sodium** 3mg
• Carb exchanges 1 • GI estimate low • Gluten-free

CHARGRILLED CORN, AVOCADO AND TOMATO BRUSCHETTA **GFO**

1 Remove husk and silk from **1 cob corn**. Wrap in foil and cook on a barbecue, preheated on medium-high, turning occasionally, for 15–20 minutes or until corn is tender. Remove from foil, spray with cooking spray and cook on barbecue, turning often, for 4–5 minutes or until corn is slightly charred. Set aside to cool for 10 minutes.
2 Cut kernels off cob and place in a bowl with finely chopped flesh of **1 small avocado, 1 large tomato,**

deseeded, finely chopped, **1 Tbsp fresh lemon or lime juice, 1 tsp extra virgin olive oil** and **freshly ground black pepper**.
3 Toast **six 30g slices wholemeal sourdough** or **gluten-free bread** and spread each slice with **3 tsp baba ganoush**. Top each with a few **rocket or spinach leaves**. Top with corn mixture and serve.
Serves 6 (as an entrée or starter).

PER SERVE 765kJ, **protein** 6g, **total fat** 8.7g (sat fat. 1.5g), **carbs** 18g, **fibre** 5g, **sodium** 195mg
• Carb exchanges 1
• GI estimate low
• Gluten-free option

BBQ CORN WITH HERBED SPREAD **GF**

1 Pull the husk almost all the way back off **2 corn cobs**. Remove and discard the silk.
2 Combine **2 Tbsp finely chopped herbs** (like parsley, chives and basil), **2 tsp light margarine, 1 crushed clove garlic** and **zest of ½ lemon**. Season with **pepper**. Rub all over corn. Pull up husks to enclose the corn kernels.

Wrap each cob in foil.
3 Cook the corn on the barbecue for 20 minutes, turning occasionally, or until the corn is tender. Cut each piece of corn in half.
Serves 4 (as a snack). ➤

PER SERVE 461kJ, **protein** 4g, **total fat** 3.3g (sat. fat 0.6g), **carbs** 13g, **fibre** 6g, **sodium** 14mg • Carb exchanges 1 • GI estimate low
• Gluten free





CHICKEN AND CORN NACHOS

PREP TIME: 15 MINS

COOK TIME: 30 MINS

SERVES 4 (AS A MAIN)

1 tsp extra virgin olive oil
 1 brown onion, finely chopped
 500g lean chicken breast mince
 2 Tbsp Old El Paso Salt-Reduced Taco Spice Mix
 375ml (1½ cups) Val Verde Passata
 250ml (1 cup) water
 400g can no-added-salt red kidney beans, rinsed and drained
 160g (1 cup) fresh corn kernels
 1 carrot, coarsely grated
 1 zucchini, coarsely grated
 40g Macro Organic Original Corn Chips
 60g (½ cup) reduced-fat grated cheese
 2 Tbsp Weight Watchers Extra Light Sour Cream, whisked until smooth
 Coriander leaves, to serve

1 Heat oil in a large non-stick frying pan over medium heat. Add onion and cook, stirring occasionally, for 4-5 minutes or until onion softens. Increase heat to high. Add mince and spice mix. Cook, stirring, for 2 minutes or until the mince just changes colour.

2 Add passata, water, beans, corn, carrot and zucchini to pan. Cover and bring to simmer over medium heat. Cook, covered, for 5 minutes. Remove lid and cook for a further 5 minutes or until mix thickens.

3 Preheat oven to 180°C (fan-forced). Spoon mince mix into ovenproof dish. Push chips into mix. Sprinkle over the cheese. Bake for

8-10 minutes or until cheese melts.

4 To serve, top the nachos with sour cream and coriander leaves.

COOK'S TIP

Replace chicken with lean pork mince or extra lean beef mince.



CREAMY CRAB AND CORN BITES

PREP TIME: 15 MINS

COOK TIME: 5 MINS

SERVES 4 (AS A SNACK)

1 small cob corn, husk and silk removed
 170g can crab meat, drained, excess liquid squeezed out
 4 small radishes, trimmed, finely chopped
 3 Tbsp finely chopped coriander
 1 Tbsp light mayonnaise or gluten-free mayonnaise
 Zest and juice of half a lemon
 ½ small red chilli, membrane and seeds removed, finely chopped
 Freshly ground black pepper
 12 witlof leaves, washed, dried

1 Put corn in microwave-safe dish with 60ml (¼ cup) water. Cover and cook on high/100% for 4 minutes or until tender. Drain well. Set aside to cool for 5 minutes.

2 Cut kernels off cob and place in a bowl. Add crab, radish, coriander, mayo, zest, juice and chilli. Season with pepper. Combine well.

3 Spoon filling evenly onto the witlof leaves. Serve.

COOK'S TIP

You can replace witlof with 3 large Lebanese cucumbers, halved lengthways, seeds removed with a spoon. Fill with crab mix and cut each cucumber half into 3-4 pieces.



CORN, VEGIE AND BACON MUFFINS

PREP TIME: 20 MINS

COOK TIME: 30 MINS

SERVES 6 (AS A LIGHT MEAL)

½ tsp olive oil
60g Hans 98% Fat Free Short Cut Bacon, finely chopped
1 carrot, coarsely grated
1 zucchini, coarsely grated
160g (1 cup) fresh corn kernels
3 green shallots, trimmed, sliced
200g (1¼ cups) wholemeal self-raising flour
250ml (1 cup) buttermilk
2 x 60g eggs, lightly whisked
40g (¼ cup) reduced-fat grated cheese
Salad leaves, to serve

1 Preheat oven to 180°C (fan-forced). Line 6 x 250ml (1 cup) non-stick muffin pans with Multix Baking Paper Cases or spray cases with cooking spray.

2 Heat oil in a medium non-stick frying pan over medium heat. Add bacon. Cook, stirring, for 2 minutes. Add carrot, zucchini and corn. Cook, stirring, for 1 minute. Transfer to a large bowl and stir in shallots.

Set aside for 10 minutes to cool.

3 Add flour, buttermilk, eggs and cheese to vegetable mixture. Spoon mixture evenly between lined pans. Bake for 20-25 minutes or until muffins are light golden brown and a skewer inserted into the middle comes out clean.

4 Serve muffins with salad leaves.

COOK'S TIP

Keep muffins in the fridge in an airtight container for up to 3 days. Alternatively, individually wrap them in plastic wrap. Put in resealable freezer bag and expel air. Freeze for up to 3 months.



ROASTED EGGPLANT, CORN AND PARSLEY SALSA WITH FISH

PREP TIME: 15 MINS

COOK TIME: 30 MINS

SERVES 4 (AS A MAIN)

1 cob corn, husk and silk removed
Olive oil cooking spray
1 red capsicum
1 eggplant, thickly sliced
2 Tbsp finely chopped flat-leaf parsley
2 tsp extra virgin olive oil
Juice of half a lemon
Freshly ground black pepper
4 x 150g pieces firm white fish fillets
3 cups mixed salad leaves
1 Lebanese cucumber, peeled into ribbons using a vegetable peeler
20g (½ cup) parmesan shavings

Balsamic glaze, to serve
4 x 60g sourdough rolls
or gluten-free rolls, to serve

1 Preheat oven to 230°C (fan-forced). Line a baking tray with baking paper. Wrap corn in foil and place on tray. Spray capsicum with cooking spray and place on tray with corn. Roast for 20 minutes or until corn is tender and capsicum skin blisters. Remove from oven. Set aside for 10 minutes to cool.

2 Meanwhile, preheat a chargrill pan or barbecue grill on medium-high. Spray eggplant slices with cooking spray. Add to chargrill and cook for 2-3 minutes each side, or until tender. Finely chop 100g of the eggplant and cut the remaining eggplant into strips.

3 Peel capsicum and remove seeds and membrane. Finely chop half the capsicum and cut the rest into strips. Cut the corn off the cob.

4 To make salsa, place chopped eggplant, chopped capsicum and half the corn in a bowl. Add parsley, 1 tsp olive oil and juice. Season with pepper, toss to combine. Set aside.

5 Heat remaining oil in a small non-stick frying pan. Add fish and cook for 2 minutes each side or until just cooked through. Transfer to serving plates.

6 Put eggplant and capsicum strips, rest of corn, salad leaves and cucumber in a bowl. Toss. Transfer to a shallow serving bowl. Top with parmesan. Drizzle with glaze. Serve with fish, salsa and rolls.

COOK'S TIP

Try replacing parsley with basil or dill and lemon juice with lime juice. The fish can be replaced with lean skinless chicken breast fillet. Cook chicken for 4 minutes a side, or until cooked through. ■

How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 1360kJ,
protein 24g, total
fat 8.6g (sat. fat
2.4g), carbs 34g, fibre
6g, sodium 894mg
• Carb exchanges 2½
• GI estimate medium
• Gluten-free option

GFO

**HUMMUS,
CHARGRILLED
VEGETABLE AND
PRAWN PIZZA**

Packed with smoky
flavours and crisp textures,
this pizza is *delizioso*!
see recipe, page 30 >>

single serves

GFO

**CHICKEN,
SEMI-DRIED TOMATO
AND ROCKET
PESTO PASTA**

It's easy being green
with this super tasty
dish on the menu.

see recipe, page 30 >>



Cooking FOR ONE

NUTRITION INFO

PER SERVE 2200kJ,
protein 41g, total
fat 16.4g (sat. fat
3.6g), carbs 31g, fibre
11g, sodium 603mg
• Carb exchanges 2
• GI estimate low
• Gluten-free option

**Get satisfying bites on
the table in 30 minutes**

NUTRITION INFO

PER SERVE 1910kJ,
protein 31g, total
fat 20.7g (sat. fat
3.4g), carbs 32g,
fibre 9g, sodium
767mg

- Carb exchanges 2
- GI estimate low

*Try to make it a
priority to regularly
cook delicious, real
food for yourself*



VEGETARIAN FRIED RICE

Enjoy this quick and easy
fried rice for your next
meat-free meal.

see recipe, page 31 >>

single serves

**ROASTED TOMATO
AND BARLEY SALAD
WITH POACHED EGG**

Now here's a show-
stopping salad that really
raises the barley!
see recipe, page 31 >>



NUTRITION INFO

PER SERVE 1710kJ,

protein 18g,

total fat 17.8g

(sat. fat 4g),

carbs 36g, fibre 13g,

sodium 193mg

• Carb exchanges 2½

• GI estimate low



HUMMUS, CHARGRILLED VEGETABLE AND PRAWN PIZZA

PREP TIME: 20 MINS

COOK TIME: 10 MINS

SERVES 1 (AS A MAIN)

- 1 Pocket Pita Lite, wholemeal or gluten-free wrap
- 1½ Tbsp hummus
- 1 cup baby spinach leaves
- 50g (¼ cup) drained chargrilled eggplant, patted dry with paper towel, cut into thin strips
- 2 Tbsp drained roasted red capsicum strips in vinegar, patted dry with paper towel
- 160g green prawns, peeled and deveined, tails intact
- 2 tsp extra-light sour cream
- 1 tsp sweet chilli sauce or gluten-free sweet chilli sauce
- Coriander leaves (optional), to serve
- 1 small Lebanese cucumber, peeled into ribbons
- 8 cherry tomatoes, halved

1 Preheat oven to 220°C (fan-forced). Line a baking tray with baking paper. Place pita pocket on tray. Spread hummus evenly over the pocket.

2 Top hummus with half the spinach leaves, then add eggplant and capsicum strips. Top with prawns. Bake for 8 minutes, or until prawns are cooked and the base is slightly crispy.

3 To serve, spoon sour cream over the top. Drizzle over sweet chilli sauce and sprinkle with coriander leaves, if using. Toss remaining spinach leaves with cucumber and tomatoes. Serve salad with the pizza.

COOK'S TIP

Try replacing the prawns with thinly sliced skinless chicken breast fillet and the coriander with flat-leaf parsley.



CHICKEN, SEMI-DRIED TOMATO AND ROCKET PESTO PASTA

PREP TIME: 10 MINS

COOK TIME: 15 MINS

SERVES 1 (AS A MAIN)

- 40g dried spiral pasta or gluten-free pasta
- ½ tsp extra virgin olive oil
- 125g skinless chicken breast fillet, trimmed of fat
- 50g (¼ cup) Sandhurst Lite Semi-Dried Tomatoes
- 1 cup rocket leaves
- 1 small clove garlic, peeled
- 1 Tbsp walnut pieces
- 1 Tbsp fresh lemon juice
- 1 Tbsp hot water
- 1 Tbsp finely grated parmesan
- Freshly ground black pepper
- Micro herbs, to serve (optional)

1 Cook the pasta in a small saucepan of boiling water for 10-12 minutes or until al dente. Drain well and return to pan.

2 Meanwhile, heat oil in a small non-stick frying pan over medium. Add chicken and cook for 4 minutes each side, or until cooked through. Transfer to plate. Cool slightly. Shred chicken.

3 For pesto, put tomatoes, rocket, garlic, walnuts, lemon juice, water and half the parmesan in a small food processor. Process until finely chopped and well combined.

4 Add pesto to the pan with pasta and chicken. Season with pepper. Cook, tossing, until heated through. Top with remaining parmesan and micro herbs (if using) and serve.

COOK'S TIPS

- ▶ Try replacing the rocket with a mix of basil and spinach leaves, and the walnuts with pine nuts.
- ▶ No food processor? Finely chop the ingredients instead.



VEGETARIAN FRIED RICE

PREP TIME: 10 MINS
COOK TIME: 5 MINS
SERVES 1 (AS A MAIN)

- 1 tsp olive oil
- 60g egg, whisked
- 200g pre-cut or stir-fry vegetables
- 1 Tbsp water
- 100g SOYCO Japanese Tofu, cut into thin strips
- ½ x 120g SunRice Basmati Quick Cups
- 1 Tbsp fresh lemon juice
- 1 tsp salt-reduced soy sauce
- 1 tsp sweet chilli sauce

1 Heat half the oil in non-stick wok over medium-high, brushing oil over the sides of the wok. Pour egg into wok, turning wok to coat the sides. Cook for 1-2 minutes or until egg is set. Transfer to a board. Cut into strips. Set aside.

2 Heat remaining oil in a wok over high. Add vegetables and stir-fry for 2 minutes. Add water, cover and cook for 1 minute or until vegetables are tender.

3 Add tofu and rice to wok. Toss to combine. Heat through. Add combined lemon juice, soy and sweet chilli sauce. Toss to combine. Toss in egg. Serve.

COOK'S TIP

You can also use any leftover vegies you have in your fridge instead of buying pre-cut ones. Just slice or chop them up so you have the same weight as specified in the recipe.



ROASTED TOMATO AND BARLEY SALAD WITH POACHED EGG

PREP TIME: 10 MINS
COOK TIME: 20 MINS
SERVES 1 (AS A MAIN)

- 3 Tbsp pearl barley
- 250g punnet cherry tomatoes
- 1 bunch asparagus, woody ends trimmed
- Olive oil cooking spray
- 2 tsp white vinegar
- 60g egg, at room temperature
- 1 cup rocket leaves, shredded or roughly torn
- 1 Tbsp finely grated parmesan
- Freshly ground black pepper, to serve
- Lemon wedge (optional), to serve

Lemon dressing

- 2 tsp fresh lemon juice
- 1 tsp extra virgin olive oil
- Freshly ground black pepper

1 Cook barley in a small saucepan of boiling water for 20 minutes, or until tender. Drain well and transfer to a medium bowl.

2 Meanwhile, preheat oven to 210°C (fan-forced). Line a roasting pan with baking paper. Add tomatoes and asparagus and spray with the cooking spray. Roast for 10 minutes or until tomato skin starts to split and asparagus is tender. Slice asparagus diagonally.

3 Fill a small saucepan with water. Add vinegar and bring to a simmer. Using a large metal spoon, stir to make a whirlpool. Crack the egg into a small bowl, then carefully tip into water. Cook for 2 minutes for a soft poached egg. With a slotted spoon, transfer to a plate lined with paper towel.

4 To make lemon dressing, whisk all ingredients together in a bowl.

5 Add the tomatoes, asparagus and rocket to barley. Add dressing. Toss to combine. Place on a serving plate. Top with the egg and parmesan. Sprinkle with pepper and serve with a lemon wedge, if desired.

COOK'S TIP

You can replace the cherry tomatoes with Roma tomatoes cut into thin wedges, and the rocket with spinach leaves. ■



How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 737kJ,
protein 7g, total
fat 4.0g (sat. fat 1.2g),
carbs 29g, fibre 1g,
sodium 80mg

- Carb exchanges 2
- GI estimate medium
- Gluten free

Gluten-free baking

THE PERFECT
TREAT FOR ANY
OCCASSION

GF

CHOCOLATE ESPRESSO TART

A wonderful after-dinner
confection, dark...
and satisfying.
see recipe, page 37 >>

GF

**CLASSIC SPONGE
WITH JAM AND CREAM**

Bring back the classic
high tea centrepiece
see recipe, page 37 >>



NUTRITION INFO

PER SERVE 674kJ,
protein 6g, total fat
3.3g (sat. fat 1.0g),
carbs 27g, fibre 1g,
sodium 75mg
• Carb exchanges 2
• GI estimate medium
• Gluten free

desserts

GF

BERRY BREAD PUDDING

Sumptuous update of
an old English favourite.
see recipe, page 38 >>



NUTRITION INFO

PER SERVE 682kJ,
protein 7g, total fat
4.7g (sat. fat 1.1g),
carbs 23g, fibre 2g,
sodium 169mg
• Carb exchanges 1½
• GI estimate medium
• Gluten free

CHOCOLATE STICKY DATE PUDDING

PREP TIME: 20 MINS

COOK TIME: 20 MINS

SERVES 6 (AS AN OCCASIONAL DESSERT)

Cooking spray

50g dried dates or figs, finely chopped

½ tsp bicarbonate of soda

60ml (¼ cup) boiling water

2 Tbsp light margarine

2 Tbsp brown sugar

70g (½ cup) gluten-free self-raising flour (see Cook's Tips)

2 Tbsp cocoa powder, sifted

1 egg yolk (from 60g egg), lightly whisked

½ tsp vanilla extract

Chocolate sauce

2 Tbsp cocoa powder, sifted

2 Tbsp brown sugar

1 tsp gluten-free cornflour

125ml (½ cup) Nestle Carnation Light and Creamy Evaporated Milk

60ml (¼ cup) water

½ tsp vanilla extract

1 Preheat oven to 170°C (fan-forced). Spray six 80ml (⅓ cup) ovenproof ramekins with cooking

spray. Place on a baking tray.

2 Put dates and bicarbonate of soda in a small heatproof bowl. Pour over boiling water and stir. Add margarine and sugar, and mix until margarine melts. Set aside to cool for 10 minutes.

3 Combine flour and cocoa powder in a medium bowl. Add date mixture, yolk and vanilla extract. Mix until well combined. Divide evenly between dishes and smooth surface. Bake for 12-15 minutes or until a skewer inserted in the centre comes out clean.

4 Meanwhile, to make the chocolate sauce, put cocoa powder, brown sugar and cornflour in a small saucepan. Gradually whisk in the milk and water. Cook, stirring, over medium heat until sauce thickens and comes to a simmer. Simmer for 1 minute. Remove pan from heat and stir in the vanilla extract.

5 Turn puddings out onto serving plates (topside up). Spoon over the chocolate sauce and serve.

COOK'S TIP

These recipes were tested using Woolworths gluten-free flour. Results may vary slightly depending on the brand you use. ➤

GF

NUTRITION INFO

PER SERVE 734kJ, protein 4g, total fat 5.9g (sat. fat 1.8g), carbs 26g, fibre 3g, sodium 186mg
• Carb exchanges 1½
• GI estimate medium
• Gluten free

NUTRITION INFO

PER SERVE 647kJ,
protein 4g, total fat 3.4g
(sat. fat 1.9g), carbs 26g,
fibre 3g, sodium 41mg
• Carb exchanges 1½
• GI estimate medium
• Gluten free



GF

SELF-SAUCING PASSIONFRUIT AND COCONUT PUDDING

Send your tastebuds on
a tropical holiday.
see recipe, page 38 >>



CHOCOLATE ESPRESSO TART

PREP TIME: 25 MINS
(+ 1 HOUR 20 MINS CHILLING)
COOK TIME: 50 MINS
SERVES 14
(AS AN OCCASIONAL DESSERT)

185ml (¾ cup) freshly brewed coffee
3 Tbsp cocoa powder
375ml can Nestle Skim Sweetened Condensed Milk
3 x 60g eggs

Pastry

140g (1 cup) gluten-free plain flour
(see Cook's Tip on page 35)
2 Tbsp cocoa powder, sifted
60g light margarine
1 egg yolk (from 60g egg)
3 Tbsp chilled water

1 To make pastry, put flour, cocoa powder and margarine in a small food processor. Cover and process until well combined. Add egg yolk and enough water to just bring the mixture together. Turn out onto a lightly floured surface and form a ball. Shape the mixture into a disc. Wrap in plastic wrap and put in the fridge for 20 minutes to chill.

2 Roll pastry out between two pieces of baking paper to line a 22cm loose-bottomed flan tin. Trim any excess pastry. Place the tin on a tray lined with baking paper and place in the fridge for 1 hour to chill.

3 Preheat oven to 170°C (fan-forced). Line pastry case

with baking paper and fill with baking beads. Bake for 10 minutes. Remove paper and beads, cook for a further 5 minutes or until pastry is just cooked through. Set aside.

4 Put coffee and cocoa powder in a heatproof jug. Stir until well combined. Cool for 15 minutes. Add condensed milk and eggs to coffee mixture. Whisk until well combined.

5 Place pastry case in the oven and carefully pour in the filling. Reduce oven temperature to 150°C (fan-forced) and bake for 35-40 minutes or until the filling is just set. Set aside in the tin to cool.

COOK'S TIP

Keep the tart in an airtight container in the fridge for up to 5 days.



CLASSIC SPONGE WITH JAM AND CREAM

PREP TIME: 20 MINS
COOK TIME: 20 MINS
SERVES 12
(AS AN OCCASIONAL DESSERT)

Cooking spray
100g reduced-fat fresh ricotta
100g vanilla frûche
4 Tbsp reduced-sugar strawberry spread
Gluten-free icing sugar, to serve (optional)

Sponge

5 x 60g eggs, at room temperature
110g (½ cup) caster sugar
1 tsp vanilla extract
175g (1¼ cups) gluten-free self-raising flour (see Cook's Tip on page 35)
100g strawberries, to serve

1 Preheat oven to 160°C (fan-forced). Spray 2 x 4cm deep, 18cm (base measurement) round cake pans with cooking spray. Line the bases with baking paper.

2 To make the sponge, using an electric mixer with a whisk attachment, whisk the eggs for 8-10 minutes or until thick and creamy. Add the sugar, 1 Tbsp at a time, beating well until sugar dissolves. Whisk in vanilla extract. Sift flour and add to egg mixture. Use a large metal spoon to gently fold in until just combined.

3 Divide mixture evenly between the prepared pans and bake for 18-20 minutes or until light golden brown or the sponge springs back when touched. Line a wire rack with baking paper. Turn out sponges on the racks to cool.

4 Whisk the ricotta until almost smooth. Add the frûche and whisk until smooth. Place one of the sponges on a serving plate. ➤

Spread the strawberry spread over sponge. Top with the ricotta mixture and then top with the remaining sponge. Dust with icing sugar, top with the strawberries and serve.

COOK'S TIP

You can replace the strawberries with a combination of raspberries and blueberries, if desired.



BERRY BREAD PUDDING

PREP TIME: 25 MINS
(+ 45 MINS STANDING)
COOK TIME: 40 MINS
SERVES 10 (AS AN
OCCASIONAL DESSERT)

Cooking spray
8 slices Helga's Gluten-Free
Sunflower and Red Quinoa Bread
2 Tbsp reduced-sugar
strawberry spread
4 x 60g eggs
375ml (1½ cups) low-fat milk
Ground cinnamon
300g mixed frozen berries,
defrosted on paper towel
60g (¼ cup) brown sugar
1 Tbsp demerara sugar

1 Spray a 2L (8-cup) ovenproof dish with cooking spray. Spread one side of each piece of bread with a thin layer of the spread. Cut each slice into 4 triangles. Whisk the eggs, milk and a pinch of cinnamon in a jug.

2 Arrange half the bread over base of dish. Top with half the berries and half of the brown sugar. Top with remaining bread slices, berries and brown sugar. Pour over egg mixture. Push bread down slightly into egg mixture. Place dish on a baking tray and set aside for 30 minutes to allow bread to absorb some of the liquid.

3 Preheat oven to 170°C (fan-forced). Sprinkle the demerara sugar and a little cinnamon over the top of pudding. Bake pudding for 35-40 minutes or until top is light golden brown and the pudding is set. Set aside for 15 minutes before serving.

COOK'S TIP

You can replace the strawberry spread with reduced-sugar spread of any flavour, and the mixed berries with just one type of frozen berry, if you prefer.



SELF-SAUCING PASSIONFRUIT AND COCONUT PUDDING

PREP TIME: 10 MINS
COOK TIME: 20 MINS
SERVES 8 (AS A DESSERT)

Cooking spray
175g (1¼ cups) gluten-free
self-raising flour
(see Cook's Tip on page 35)
2 Tbsp brown sugar
20g (¼ cup) desiccated coconut
125ml (½ cup) skim milk
60g egg, lightly whisked
1 tsp vanilla extract
Pulp from 2 passionfruit

Sauce

60g (⅓ cup) brown sugar
1 tsp gluten-free cornflour
Pulp from 4 passionfruit
Boiling water

1 Preheat oven to 170°C (fan-forced). Spray 1.5L (6-cup) ovenproof dish with cooking spray. Place on baking tray. Put flour, sugar, coconut, milk, egg and vanilla in medium bowl. Whisk until just combined. Stir in pulp. Spoon mixture into prepared dish.

2 For sauce, combine sugar and cornflour, and sprinkle over cake batter. Strain pulp from juice. Set seeds aside. Put juice in heatproof jug and pour in enough boiling water to come up to 375ml (1½ cups). Pour carefully over the back of a metal spoon over cake batter.

3 Bake pudding for 18-20 minutes or until a skewer inserted halfway into middle comes out clean. Set aside for 5 minutes. Scoop serves into bowls. Add seeds to sauce in bottom. Spoon over pudding. ■

*Sweet celebrations to
end a special meal in
sumptuous style*

cover recipe

One-pan wonder

COVER
STAR

ITALIAN SAUSAGE AND VEGIE TRAY ROAST

PREP TIME: 15 MINS

COOK TIME: 30 MINS

SERVES 4 (AS A MAIN)

2 red capsicum, cut into chunks
4 zucchini, halved lengthways,
thickly sliced
2 red onions, cut into wedges
Extra virgin olive oil cooking spray
12 Peppercorn Extra Lean Beef
Chipolatas (sausages)
250g punnet cherry tomatoes
Small basil leaves, to serve (optional)

Pesto

1 cup basil leaves, roughly chopped
2 tsp pine nuts
1 clove garlic, peeled
1½ Tbsp fresh lemon juice
1 Tbsp extra virgin olive oil
1 Tbsp finely shredded parmesan

1 Preheat your oven to 200°C (fan-forced). Put capsicum, zucchini and onion in a large, shallow roasting pan. Spray with cooking spray. Roast for 20 minutes.

2 Spray sausages and tomatoes with oil. Add to pan with vegetables and roast for a further 10 minutes or until vegies are tender and golden at edges and sausages are cooked through.

3 Meanwhile, to make pesto, put basil, pine nuts, garlic, lemon juice, oil and 1 Tbsp water in mortar. Use pestle to pound ingredients until well combined. Stir in parmesan.

4 Drizzle sausages and vegies with pesto. Top with basil leaves if you like, and serve. ■

How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 1510kJ,
protein 24g, total fat
18g (sat. fat 6g),
carbs 19g, fibre 12g,
sodium 593mg

- Carb exchanges 1½
- GI estimate low
- Gluten free
- Lower carb

GF

LC

light meals



You can make friends with these healthy, delicious and filling salads

Power salads

CHICKEN AND BROCCOLI SALAD WITH BUTTERMILK DRESSING

GFO

PREP TIME: 15 MINS
(+ 2 HOURS CHILLING)
SERVES 4 (AS A LIGHT MEAL)

250g classic coleslaw mix
(without dressing)
200g coarsely chopped
cooked skinless
chicken breast
75g (½ cup) dried
cranberries
3 celery sticks, thinly sliced
1 small red onion,
finely chopped

80ml (⅓ cup) buttermilk
80ml (⅓ cup) 97%
fat-free mayonnaise or
gluten-free mayonnaise
1 Tbsp honey
1 Tbsp apple cider vinegar
1 tsp dry mustard powder
Freshly ground black pepper
120g pkt baby spinach leaves

1 Put the coleslaw,
chicken, cranberries,
celery and onion in a large
bowl. Toss to combine.
2 Whisk the buttermilk,
mayonnaise, honey, cider
vinegar, mustard and
pepper in a small bowl. Pour

over
salad and toss to coat.
Cover and put in the fridge
for at least 2 hours, or up
to 24 hours to chill.

3 To serve, toss the baby
spinach into the salad. ➤

NUTRITION INFO

PER SERVE 867kJ, protein 14g,
total fat 3.7g (sat. fat 0.9g),
carbs 28g, fibre 5g,
sodium 232mg
• Carb exchanges 2
• GI estimate low
• Gluten-free option

How our
food works
for you
see page 77

NUTRITION INFO

Left: PER SERVE 930kJ,
protein 14g, total fat
11.3g (sat. fat 2.1g),
carbs 10g, fibre 10g,
sodium 316mg
• Carb exchanges ½
• GI estimate low
• Gluten-free option
• Lower carb

GFO LC

CAULIFLOWER SALAD WITH DILL DRESSING

Asparagus and
cauliflower lead the way
in this savoury sensation.
see recipe, page 45 >>

NUTRITION INFO

with Desiree
potatoes

PER SERVE 858kJ,
protein 13g, total fat
6.2g (sat. fat 1.6g),
carbs 20g, fibre 7g,
sodium 434mg
• Carb exchanges 1½
• GI estimate low
• Gluten-free option
• Lower carb

NUTRITION INFO

with Zerella Fresh
Spud Lite potatoes

PER SERVE 839kJ,
protein 13g, total
6.2g (sat. fat 1.6g),
carbs 19g, fibre 7g,
sodium 438mg
• Carb exchanges 1½
• GI estimate low
• Gluten-free option
• Lower carb

GFO LC

WARM POTATO AND SPROUT SALAD WITH LEMON VINAIGRETTE

With elements like bacon, chickpeas
and cheese, there's lots to love.
see recipe, page 45 >>

Protein, healthy fats, and powerful disease-fighting fruit and veg

SEARED SESAME TUNA WITH FENNEL AND APPLE SLAW

GFO LC

PREP TIME: 20 MINS

COOK TIME: 5 MINS

SERVES 4 (AS A LIGHT MEAL)

2 egg whites (from 60g eggs)
1 Tbsp water
40g (¼ cup) panko breadcrumbs
or gluten-free breadcrumbs
2 Tbsp sesame seeds
400g tuna steaks
1 Tbsp canola oil
100g baby spinach leaves

Fennel and apple slaw

1 head fennel, trimmed, outer layer removed, feathery tops reserved, thinly sliced
1 green apple, quartered, cored, cut into thin sticks

1 small carrot, coarsely grated
4 radishes, halved crossways, thinly sliced
60ml (¼ cup) rice wine vinegar
1 Tbsp canola oil
1 tsp sesame oil
2 Tbsp shredded mint
Pinch chilli flakes (optional)

1 To make the slaw, combine the fennel, apple, carrot and radish in a large bowl. Whisk vinegar, oils, mint and chilli flakes, if using, in a bowl. Add to the fennel mixture and toss to combine. Set aside.

2 Whisk egg whites and water in a shallow dish. In a separate shallow dish combine the breadcrumbs and sesame

seeds. Dip both sides of tuna in the egg white mixture, then in the crumb mixture, pressing down lightly to stick.

3 Heat oil in a large non-stick frying pan over medium-high heat. Add tuna and cook for 2 minutes each side or until the tuna just flakes (but will be pink in the centre). Break into pieces.

4 Divide the spinach between serving bowls. Top with slaw and tuna. Sprinkle over the reserved fennel tops, if using. ➤

NUTRITION INFO

PER SERVE 1350kJ, protein 30g, total fat 15.1g (sat. fat 1.6g), carbs 14g, fibre 5g, sodium 158mg

- Carb exchanges 1
- GI estimate low
- Gluten-free option
- Lower carb

GFO LC

STEAK AND CHIMICHURRI SALAD

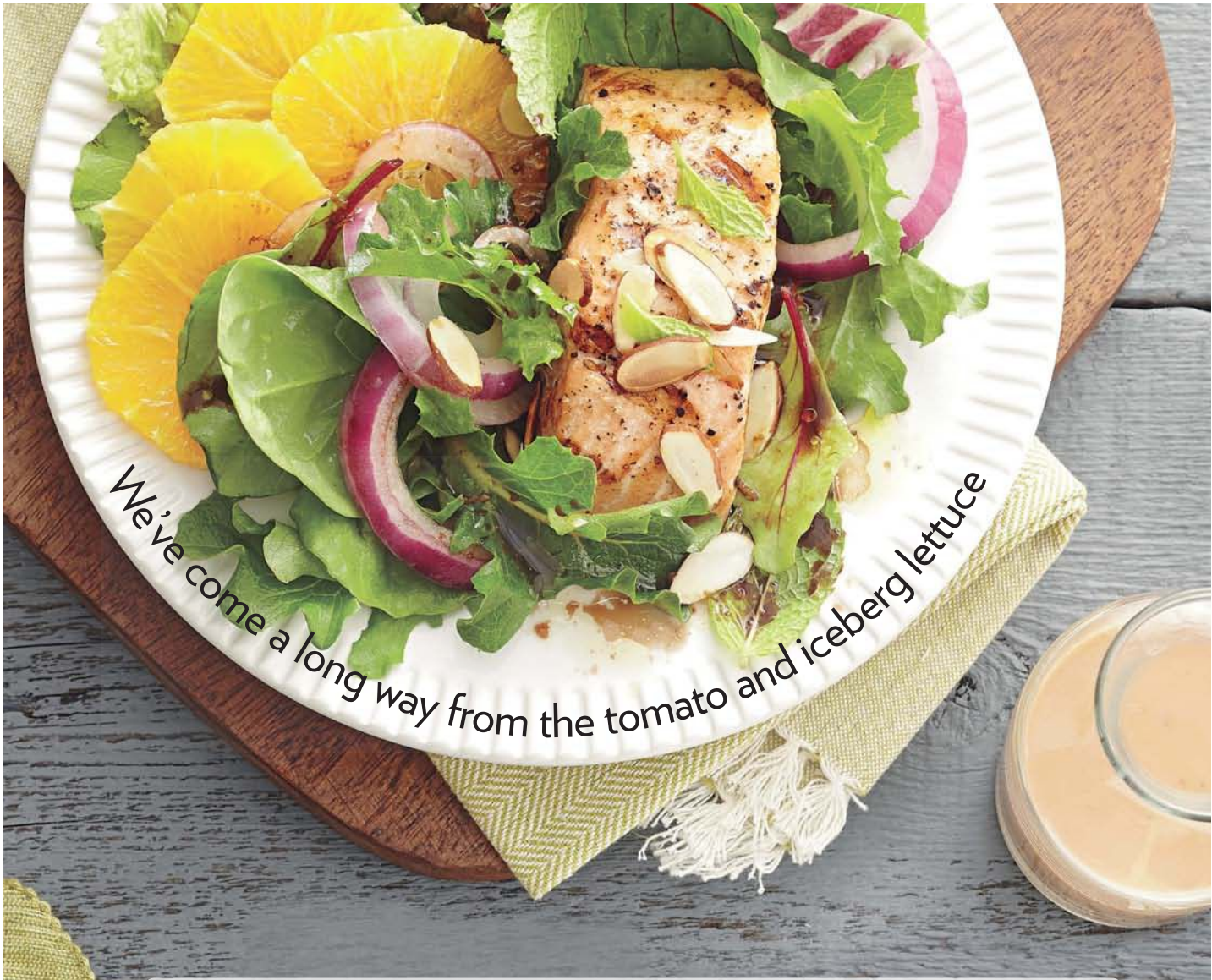
A zesty South American
sauce enlivens this
protein-packed combo.
see recipe, page 46 >>

More than a side dish, salads like this are a whole, satisfying meal

NUTRITION INFO

PER SERVE 1140kJ,
protein 24g, total fat
10.8g (sat. fat 2.5g),
carbs 16g, fibre 7g,
sodium 229mg

- Carb exchanges 1
- GI estimate medium
- Gluten-free option
- Lower carb



We've come a long way from the tomato and iceberg lettuce

SALMON AND ORANGE SALAD

GF
LC

PREP TIME: 15 MINS

COOK TIME: 10 MINS

SERVES 4

(AS A LIGHT MEAL)

3 oranges
2 Tbsp balsamic vinegar
2 tsp olive oil
2 Tbsp shredded mint
4 x 100g skinless and boneless salmon fillets
Cooking spray
Freshly ground black pepper
100g mixed salad leaves
½ small red onion, thinly sliced into rounds
2 Tbsp sliced almonds, toasted (see Cook's Tip)

1 Remove 1 tsp of zest from one of the oranges. Put in a small screw-top jar. Squeeze one orange and add 3 Tbsp juice to the orange zest. Add the vinegar, oil and mint to the jar. Cover and shake well.

2 Preheat a grill or barbecue grill on medium. Spray the salmon with cooking spray and sprinkle with pepper. Add to the grill and cook for 8–10 minutes, turning once, or until the salmon is just cooked.

3 Divide the salad leaves between serving plates. Using a small, sharp knife, remove the skin and white pith from oranges. Thinly

slice the oranges into rounds. Place orange, onion and salmon on plates. Drizzle with the dressing and sprinkle over almonds. Serve.

COOK'S TIP

To toast the almonds, cook in a small non-stick frying pan over medium heat, stirring often, for 2–3 minutes or until lightly toasted.

NUTRITION INFO

PER SERVE 1370kJ, protein 24g, total fat 18.8g (sat. fat 4.6g), carbs 14g, fibre 4g, sodium 57mg
• Carb exchanges 1
• GI estimate low
• Gluten free
• Lower carb



CAULIFLOWER SALAD WITH DILL DRESSING

PREP TIME: 20 MINS

COOK TIME: 15 MINS

SERVES 4 (AS A LIGHT MEAL)

- 2 bunches asparagus, woody ends trimmed, cut into bite-size pieces
- 700g (6 cups) small cauliflower florets
- 3 cups baby spinach leaves
- 3 cups picked watercress, chopped
- 1 small red capsicum, cut into short, thin strips
- 3 x 60g eggs, hardboiled, peeled, thickly sliced (see Cook's Tip)
- ¼ cup pitted Kalamata olives, sliced
- 30g (⅓ cup) parmesan shavings
- Freshly ground black pepper

Dill dressing

- 2 green shallots, finely chopped
- 80ml (⅓ cup) white wine vinegar
- 2 Tbsp 97% fat-free mayonnaise or gluten-free mayonnaise
- 1 Tbsp olive oil
- 2 tsp chopped dill
- 1 tsp Dijon mustard or gluten-free mustard

- 1 Put the asparagus** and 2 Tbsp of water in a shallow microwave-safe dish. Cover and cook on high/100% for 2 minutes, or until tender.
- 2 Place cauliflower** in a food processor. Pulse until it resembles rice. Transfer to a microwave-safe dish. Add 2 Tbsp of water. Cover and cook on high/100% for 6-9 minutes or until cauliflower is tender crisp. Drain and cool slightly.
- 3 Meanwhile**, put all dressing

ingredients in a small screw-top jar. Seal. Shake well to combine.

- 4 Toss spinach** and watercress with half of the dressing. Divide between serving bowls. Put the asparagus, cauliflower, capsicum and remaining dressing in a bowl. Spoon over greens. Serve with eggs, olives, parmesan and pepper.

COOK'S TIP

Cook the eggs in a small saucepan of boiling water for 5 minutes. Drain and cool. Peel.



WARM POTATO AND SPROUT SALAD WITH LEMON VINAIGRETTE

PREP TIME: 20 MINS

COOK TIME: 20 MINS

SERVES 6 (AS A LIGHT MEAL)

- 350g Desiree or Zerella Fresh Spud Lite (lower carb) potatoes, cut into chunks
- 6 slices Weight Watchers bacon, chopped
- 200g small Brussels sprouts, trimmed, quartered
- 1 small red onion, cut into thin slivers
- 60ml (¼ cup) water
- 2 tomatoes, chopped
- 420g can no-added-salt chickpeas, rinsed and drained
- 6 cups torn butter lettuce
- 60g reduced-fat feta, crumbled

Lemon vinaigrette

- 3 Tbsp fresh lemon juice
- 1 Tbsp olive oil
- 1 Tbsp honey
- 2 tsp Dijon mustard or gluten-free Dijon mustard

- 1 Cook potatoes** in a large saucepan of boiling water for 12 minutes or until tender. Drain well. Set aside to cool completely.

- 2 Meanwhile**, heat a large non-stick frying pan over medium heat. Add bacon. Cook for 4-5 minutes, stirring occasionally, or until the bacon is crisp. Transfer to a plate lined with paper towel. Set aside.

- 3 To make the vinaigrette**, put all the ingredients in a small screw-top jar. Shake well. Set aside.

- 4 Add Brussels** sprouts, onion and water to the frying pan. Cook, covered, over medium heat for 5 minutes, stirring occasionally, or until the sprouts are just tender. Remove pan from heat and stir in tomatoes, potatoes and chickpeas.

- 5 Place lettuce** on serving plates. Top with potato mixture. Drizzle with the vinaigrette. Sprinkle with feta and reserved bacon. Serve. ➤



3 WAYS TO LIVE UP

1 ADD WHOLE GRAINS

For a hearty, fibre-filled salad, add 1/3 cup cooked grains, like brown rice, quinoa or farro. Whole grains add texture and pack an extra punch of nutrients such as B vitamins and iron.



.....

2 TRY AROMATICS



Fresh herbs such as coriander and parsley, green shallots and citrus zest boost flavour without adding kilojoules and carbs. Sprinkle on greens or stir into a dressing.

.....

3 GET NUTTY

Toasted nuts and seeds add a deep flavour and a tasty crunch to salads. They also pack in protein and healthy fats. But stick to 1 Tbsp per serving to keep kJ reasonable.



STEAK AND CHIMICHURRI SALAD

PREP TIME: 20 MINS
COOK TIME: 10 MINS
SERVES 4 (AS A LIGHT MEAL)

350g lean rump steak, trimmed of fat
Freshly ground black pepper
100g rocket leaves
125g wholemeal baguette or gluten-free bread, cut into 1.5cm cubes, toasted (see Cook's Tip)
250g punnet cherry tomatoes, halved
1/2 small red onion, thinly sliced

Chimichurri sauce

1 cup firmly packed flat-leaf parsley leaves
1 cup firmly packed coriander leaves
60ml (1/4 cup) fresh lime juice
2 Tbsp red wine vinegar
1 Tbsp olive oil
1 Tbsp water
3 garlic cloves, crushed
Pinch chilli flakes

1 Make shallow diagonal cuts at 4cm intervals in a diamond pattern on both sides of the meat. Sprinkle with pepper. Set aside.

2 To make the chimichurri sauce, put parsley, coriander, lime juice, vinegar, oil, water, garlic and chilli flakes in a blender. Cover and pulse until nearly smooth.

3 Preheat a barbecue grill

on medium. Add the steak and cook for 3-4 minutes each side, for medium, or until cooked to your liking, brushing with 2 Tbsp of the sauce during the last 5 minutes of cooking. Transfer to a plate, cover loosely with foil and set aside.

4 Combine rocket, bread cubes, tomato, onion and remaining sauce in a large bowl. Thinly slice meat across the grain. Divide the rocket mixture between serving plates. Top with the steak. Serve.

COOK'S TIP

To toast the bread cubes, spread over a baking tray. Bake in an oven preheated to 180°C (fan-forced) for 8-10 minutes, stirring once, or until golden brown. ■

Chimichurri sauce has been an Argentinian staple for centuries



comfort food

Cast-iron Campfire

From brekkie to dinner, a cast-iron frying pan is an all-purpose tool for the outdoors



comfort food

How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 1600kJ,
protein 36g, total
fat 7g (sat. fat 1.3g),
carbs 33g, fibre 18g,
sodium 650mg
• Carb exchanges 2
• GI estimate low
• Gluten-free option

GFO

FIRESIDE FAJITAS

Tex-Mex cuisine simply
cries out for some
hot embers flavour.
see recipe, page 54 >>



NUTRITION INFO

PER SERVE 1810kJ,
protein 28g, total fat
23.4g (sat. fat 5.9g),
carbs 24g, fibre 7g,
sodium 419mg
• Carb exchanges 1½
• GI estimate low
• Gluten-free option
• Lower carb

EGG AND TURKEY SCRAMBLE

PREP TIME: 20 MINS

COOK TIME: 30 MINS

SERVES 4 (AS A BREAKFAST)



1 Tbsp olive oil
350g orange sweet potato,
peeled, cut into 2cm pieces
1 large brown onion, chopped
220g lean turkey mince
4 x 60g eggs, lightly whisked
½ tsp dried mixed herbs, crushed
¼ tsp garlic powder
¼ tsp freshly ground
black pepper
2 cups baby spinach leaves
60g (½ cup) shredded
reduced-fat cheese

4 slices wholemeal grain bread
or gluten-free bread, to serve

1 Light firewood or charcoal
and let fire burn down to
medium-hot embers or
coals. Top with a grill rack.

2 Heat a large cast-iron frying
pan over fire for 5 minutes or
until very hot. Add oil and heat
for 30 seconds. Add sweet
potato and cook, stirring
occasionally, for 15 minutes.
Add onion and turkey mince.
Cook, stirring, for 5 minutes
or until vegetables are tender,
stirring frequently.

3 Add eggs, herbs, the garlic
powder and pepper to the pan.

Cook, without stirring, until
the mixture begins to set on
the bottom and around the
edges. Using a spatula, lift
and fold partially cooked
egg mixture so uncooked
portion flows underneath.
Cook for 2 minutes more or
until mixture is cooked through.
Gradually add spinach, tossing
just until wilted. Sprinkle with
cheese. Serve with bread.

COOK'S TIP

If you're not near a camp
fire, you can simply cook
the scramble in a frying
pan over a barbecue or
portable hotplate. ➤

comfort food

NUTRITION INFO

PER SERVE 1430kJ,
protein 32g, total
fat 9.7g (sat. fat
3.9g), carbs 23g,
fibre 12g,
sodium 557mg
• Carb exchanges 1½
• GI estimate low
• Gluten free
• Lower carb



GF LC

CHILLI CON CARNE

A hearty dish that shines
in the open air.

see recipe, page 54 >>



PAN-ROASTED CAMP-FIRE VEGIES

PREP TIME: 15 MINS

COOK TIME: 20 MINS

SERVES 4 (AS A SIDE)



- 1 Tbsp sugar
- 1 Tbsp water
- 1 Tbsp salt-reduced soy sauce
or gluten-free soy sauce
- 2 tsp apple cider vinegar
- 1-2 tsp sriracha sauce
(see Cook's Tips)
- 2 tsp canola oil
- 500g small button mushrooms,
halved if desired
- 8 mini vine capsicums
(available at Coles)
- 200g punnet grape tomatoes

1 Light firewood or charcoal
and let fire burn down to
medium-hot embers or coals.
Top with a grill rack.

2 Combine the sugar, water,
soy sauce, vinegar and sriracha
sauce in a small bowl. Set aside.

3 Heat a large cast-iron frying
pan over fire for 5 minutes or
until very hot. Add oil. Add
mushrooms and capsicums.
Cook, stirring occasionally,
for 8-10 minutes or until
vegetables start to char.
Add sauce. Simmer for
2-3 minutes or until reduced
slightly. Add tomatoes to
the pan and cook, stirring, for
1-2 minutes or until skins start
to blister. Serve immediately,
or at room temperature.

COOK'S TIPS

- ▶ Hot sriracha sauce can be
found in the sauce section
of the supermarket.
- ▶ If you're not near a camp
fire, you can simply cook the
vegies in a frying pan over a
barbecue or portable hotplate. ▶

NUTRITION INFO

PER SERVE 370kJ, protein 4g,
total fat 3g (sat. fat 0.3g),
carbs 8g, fibre 4g, sodium 217mg
• Carb exchanges ½
• GI estimate low
• Gluten-free option
• Lower carb

**PINEAPPLE
WITH HONEYED
YOGHURT AND
GRANOLA**

Tropical dessert
of champions!
see recipe, page 54 >>

NUTRITION INFO

PER SERVE 641kJ,
protein 3g, total fat
4.2g (sat. fat 0.5g),
carbs 24g, fibre 3g,
sodium 44mg
• Carb exchanges 1½
• GI estimate low

GFO **LC**

PAN-ROASTED CITRUS SALMON WITH GRILLED VEGETABLES

A complete gourmet meal in minutes around the camp fire. *see recipe, page 55 >>*

NUTRITION INFO
PER SERVE 2110kJ, protein 42g, total fat 27.1g (sat. fat 5.0g), carbs 20g, fibre 8g, sodium 276mg

- Carb exchanges 1½
- GI estimate low
- Gluten-free option
- Lower carb



PEACH CINNAMON CRUMBLE

A quick clean and the frying pan is ready for round two – dessert. *see recipe, page 55 >>*

NUTRITION INFO
PER SERVE (with sugar) 783kJ, protein 2g, total fat 7.6g (sat. fat 1.5g), carbs 25g, fibre 3g, sodium 87mg

- Carb exchanges 1½
- GI estimate low

PER SERVE (with sugar substitute) 743kJ, protein 2g, total fat 7.6g (sat. fat 1.5g), carbs 23g, fibre 3g, sodium 87mg

- Carb exchanges 1½
- GI estimate low



comfort food



FIRESIDE FAJITAS

PREP TIME: 20 MINS

COOK TIME: 15 MINS

SERVES 4 (AS A MAIN)

- 2 tsp Cajun seasoning
- 1 tsp garlic powder
- Freshly ground black pepper
- 450g skinless chicken breast fillet, trimmed of fat, cut into thin strips
- 2 tsp canola oil
- 1 small red capsicum, cut into short, thin strips
- 1 green capsicum, cut into short, thin strips
- 1 large brown onion, thinly sliced
- 8 Goodness Superfoods Barley Wraps or gluten-free wraps
- ½ cup Mission Chunky Salsa
- Coriander leaves, to serve (optional)
- 70g (¼ cup) plain fat-free Greek yoghurt (optional)
- 1 lime, cut into 4 wedges, to serve

1 Light the firewood or charcoal and let fire burn down to medium-hot embers or coals. Top with a grill rack.

2 Combine Cajun seasoning, garlic powder and pepper in a plastic bag. Add the chicken strips and shake well to coat.

3 Heat 1 tsp of oil in a large cast-iron frying pan over the camp fire. Add the chicken and cook for 3-4 minutes, stirring often, until the chicken is just cooked. Transfer to a plate.

4 Heat the remaining oil in the pan. Add the capsicum and onion. Cook, stirring often, for 8-10 minutes or until tender. Return the chicken to the pan and heat through.

5 Meanwhile, wrap barley wraps in foil and heat over the camp fire for 8 minutes or until warmed through, turning the packet once.

6 Serve the chicken in wraps topped with salsa, coriander, yoghurt and lime wedges.

COOK'S TIP

If you're not by a camp fire, you can simply cook the chicken and capsicum in a frying pan over a barbecue or on a portable hotplate. The wraps could be heated on the barbecue as well.



CHILLI CON CARNE

PREP TIME: 15 MINS

COOK TIME: 25 MINS

SERVES 4 (AS A MAIN)

- 1 tsp olive oil
- 350g extra lean beef mince
- 425g can no-added-salt red kidney beans, rinsed and drained
- 400g can no-added-salt diced tomatoes
- 500g pkt chopped mixed frozen vegetables
- 30g pkt reduced-salt taco spice mix
- 2 tsp Mexican chilli powder
- 2 Tbsp reduced-sugar tomato sauce
- 4 Tbsp low-fat Greek-style natural yoghurt, whisked until smooth
- 4 pitted black olives, sliced
- 2 green shallots, sliced
- 30g (¼ cup) grated red Leicester cheese
- Coriander leaves, to serve (optional)

1 Light firewood or charcoal and let fire burn down to medium-hot embers or coals. Top with a grill rack.

2 Heat oil in large cast-iron frying pan over fire. Add mince and cook, stirring, until browned. Stir in the kidney beans, tomatoes, frozen vegies, taco spice mix and chilli powder. Cook, stirring occasionally, for 20 minutes. Remove from heat and stir in tomato sauce.

3 Set chilli aside for 15 minutes to allow the flavours to develop. Top with yoghurt, olives, shallots, cheese and coriander, if using.

COOK'S TIP

If you're not by a camp fire, you can cook vegies in a frying pan on a barbecue or portable hotplate.



PINEAPPLE WITH HONEYED YOGHURT AND GRANOLA

PREP TIME: 10 MINS

COOK TIME: 20 MINS

SERVES 4 (AS A DESSERT)

- 150g fat-free Greek-style natural yoghurt
- 1 Tbsp honey
- 2 tsp canola oil
- 4 x 1.5cm-thick slices fresh pineapple
- ½ cup Crunchola Apples and Cinnamon Clusters

1 Light firewood or charcoal and let fire burn ➤

down to medium-hot embers or coals. Top with a grill rack.

2 Whisk yoghurt and honey in a small bowl. Set aside.

3 Heat the oil in a large cast-iron frying pan over fire. Add the pineapple and cook for 8 minutes, turning once, or until lightly charred.

4 To serve, spoon the yoghurt mixture over the pineapple. Top with the Crunchola clusters and serve.

COOK'S TIP

If you're not near a camp fire, you can simply cook the pineapple in a frying pan over a barbecue or portable hotplate.



PAN-ROASTED CITRUS SALMON WITH GRILLED VEGETABLES

PREP TIME: 20 MINS
(+ 1 HOUR MARINATING)
COOK TIME: 15 MINS
SERVES 4 (AS A MAIN)

- 4 x 150g boneless salmon fillets
- 2 tsp extra virgin olive oil
- 2 cloves garlic, crushed
- 1 tsp dried mixed herbs
- 60ml (¼ cup) fresh orange juice
- 3 green shallots, sliced
- Non-stick cooking spray
- 3 bunches asparagus, woody ends trimmed, cut into 5cm pieces
- 1 large yellow squash, halved lengthways, sliced
- ¼ tsp freshly ground black pepper
- Olive oil cooking spray
- Orange slices, to serve (optional)

4 small (50g each) soy and linseed rolls or gluten-free rolls, to serve

1 Place the salmon in a resealable plastic bag set in a shallow dish. Combine oil, garlic, dried herbs, orange juice and ⅓ of shallots in a small bowl and pour over salmon. Seal bag and turn to coat. Place in fridge for 1 hour to marinate, turning the bag once.

2 Light firewood or charcoal and let fire burn down to medium-hot embers or coals. Top with a grill rack.

3 Fold a 72cm piece of heavy foil in half crossways to make a 36cm square. Spray the foil with cooking spray. Place the asparagus, squash and half of the remaining shallots in centre of the foil. Sprinkle with pepper and spray with the cooking spray. Bring up two opposite edges of foil, and seal with a double fold. Fold remaining edges to enclose vegetables, leaving space for steam to build. Cook the vegetable packet over the camp fire for 10 minutes, turning once.

4 Meanwhile, drain salmon, discarding marinade. Spray a large cast-iron frying pan with cooking spray. Heat over the camp fire. Add the salmon, facing skin-side down, to the pan. Cook for 2-3 minutes each side, or until the salmon just flakes.

5 Top the salmon with the remaining green shallots and the orange slices, if using. Serve the fish with the vegetables and bread rolls.

COOK'S TIP

If you're not near a camp fire, you can simply cook the vegies and salmon on a barbecue.



PEACH CINNAMON CRUMBLE

PREP TIME: 15 MINS
COOK TIME: 15 MINS
SERVES 6
(AS AN OCCASIONAL DESSERT)

- 700g container peach slices in natural juices, drained
- 1 Tbsp plain flour
- 40g (¼ cup) dried cranberries
- 1 Tbsp sugar or granulated sugar substitute
- 4 plain digestive biscuits, crushed
- 35g (¼ cup) chopped toasted pecans
- 1 Tbsp light margarine, melted

1 Light firewood or charcoal and let fire burn down to medium-hot embers or coals. Top with a grill rack.

2 Combine peach slices, flour, cranberries and sugar in a medium bowl. Combine biscuits, pecans and margarine in a small bowl.

3 Heat a medium cast-iron frying pan over the fire for 3 minutes. Add peach mixture and sprinkle with crumb mixture. Cook for 12 minutes or until mixture is bubbly.

4 Set pan off the heat for 10 minutes before serving.

COOK'S TIPS

► If you're not near a camp fire, you can simply cook in a frying pan over a barbecue or on a portable hotplate.

► To toast pecans, cook over medium heat in the frying pan for 2-3 minutes, stirring often, or until toasted. ■

TRIM THE CARBS LOVE THE TASTE



- 25% LESS CARBS*
- LOW GI^
- GOOD SOURCE OF FIBRE

* Compared to standard mixed grain bread (NUTTAB 2010)

^ 5 Seeds GI= 53, Soy & Toasted Sesame GI= 51, Wholemeal & Seed GI= 53

IT'S NOT JUST BREAD, IT'S HELGA'S.



Get *grilled*

This month's lunch club features antipasto on a sandwich...

CHARGRILLED VEGETABLE AND SALAD SANDWICH

PREP TIME: 15 MINS

COOK TIME: 10 MINS

SERVES 2 (AS A LIGHT MEAL)

4 x ½ cm-thick lengthways slices
small eggplant

1 small red capsicum, halved length-
ways, seeds removed, flattened

1 zucchini, sliced lengthways

Extra virgin olive oil

cooking spray

¼ cup low-fat cottage cheese

1 Tbsp chopped flat-leaf

parsley

¼ tsp finely grated lemon zest

Freshly ground black pepper

4 slices Helga's Lower

Carb 5 Seeds bread

1 cup rocket leaves

1 Preheat a chargrill pan on medium-high. Spray both sides of eggplant, capsicum and zucchini with the cooking spray. Add to the chargrill and cook for 2-3 minutes each side or until the vegetables are very tender. Set aside to cool.

2 Combine the cottage cheese, parsley, lemon zest and pepper in a small bowl. Spread the cottage cheese over 2 slices of bread.

3 Top cottage cheese with the rocket and chargrilled vegetables.

4 Top sandwiches with second slices of bread. Serve. ■

NUTRITION INFO

PER SERVE 1300kJ,
protein 18g, total fat
11.7g (sat. fat 1.7g),
carbs 28g, fibre 10g,
sodium 351mg
• Carb exchanges 2
• GI estimate low

HELGA'S TASTE

A source of omega-3, protein and fibre, we used Helga's Lower Carb 5 Seeds bread in our sandwich. Available at your local supermarket.



An *Apple* a day!

Turns out there really is a scientific basis to that common phrase

IT'S TRUE!

Research shows apple eaters have a reduced risk of type 2 diabetes and are less likely to be obese. We make it easier to keep the doctor away with these sweet and satisfying recipes.

APPLE AND POMEGRANATE GALETTE

Flaky pastry enfolds sweet apples and bursts of pomegranate flavour. [see recipe, page 62 >>](#)

NUTRITION INFO

PER SERVE 740kJ, protein 3g, total fat 6.9g (sat. fat 1.3g), carbs 25g, fibre 2g, sodium 32mg

- Carb exchanges 1½
- GI estimate medium

NUTRITION INFO
PER SERVE 1930kJ,
protein 11g, total fat
23.1g (sat. fat 2.7g),
carbs 50g, fibre 8g,
sodium 108mg
• Carb exchanges 3½
• GI estimate low

in season

**SLOW-COOKER
PORRIDGE WITH
APPLES AND
WALNUTS**

Set the controls to deliver
breakfast cereal deluxe.
see recipe, page 63 >>

*Apples play nice
with so many
ingredients*



SPICED APPLE CAKE

The nicest slice – tastes
good and does you good.
see recipe, page 63 >>

NUTRITION INFO

PER SERVE (with sugar)

834kJ, protein 4g,
total fat 7.0g (sat. fat
1.5g), carbs 30g, fibre 2g,
sodium 150mg
• Carb exchanges 2
• GI estimate medium

PER SERVE (with sugar

substitute) 712kJ,
protein 4g, total fat 7.0g
(sat. fat 1.5g), carbs 22g,
fibre 2g, sodium 150mg
• Carb exchanges 2
• GI estimate medium

SEARED PORK CHOPS WITH APPLES AND ONIONS

GFO

PREP TIME: 15 MINS

COOK TIME: 25 MINS

SERVES 4 (AS A MAIN)

4 x 200g pork chops,
trimmed of fat

Freshly ground black pepper

Olive oil cooking spray

2 firm cooking apples, such
as Gala or Fuji, unpeeled,
quartered, core removed,
cut into 5mm-thick slices

1 large brown onion, cut into
thin wedges

2 cloves garlic, crushed

60ml (¼ cup) dry white wine

60ml (¼ cup) salt-reduced chicken

stock or gluten-free stock

1 tsp Dijon mustard or
gluten-free mustard

1 tsp light margarine

110g (½ cup) SunRice Doongara
Clever Low GI White Rice, cooked
following pack directions, to serve

1 Tbsp thyme leaves

500g broccoli, cut into florets,
steamed, to serve

1 Sprinkle pork with pepper.

Spray a large non-stick frying pan with cooking spray. Heat over medium-high. Add pork chops. Cook 2-3 minutes each side or just cooked through. Transfer to plate, cover with foil to keep warm.

2 Add the apples, onion and garlic to frying pan. Cook over

medium-high heat, stirring occasionally, for 6-8 minutes or until the apples are golden. Add the wine and cook, stirring to scrape any bits off base of pan, for 1-2 minutes. Stir in the stock, mustard and margarine.

3 Return chops to pan and cook for 1-2 minutes or until heated through. Serve chops and apple mixture with the rice. Sprinkle with thyme and serve with the broccoli. ➤

NUTRITION INFO

PER SERVE 2360kJ, protein 45g,
total fat 25.0g (sat. fat 8.3g),
carbs 33g, fibre 9g, sodium 208mg
• Carb exchanges 2
• GI estimate low
• Gluten-free option



in season



APPLE AND POMEGRANATE GALETTE

PREP TIME: 30 MINS
(+ 30 MINS RESTING)
COOK TIME: 40 MINS
SERVES 10
(AS AN OCCASIONAL DESSERT)

115g ($\frac{3}{4}$ cup) plain flour,
plus 2 tsp extra
80g ($\frac{1}{2}$ cup) wholemeal
plain flour
2 tsp caster sugar
60g light margarine
2 Tbsp olive oil
2-3 Tbsp cold water
2 Tbsp honey
1 sprig thyme, plus 2 tsp thyme
leaves, extra, to serve
2 tsp fresh lemon juice
2 cups thinly sliced unpeeled
red apples (see Cook's Tip)
1 egg white (from 60g egg),
lightly whisked
1 tsp demerara sugar (optional)
2 Tbsp pomegranate seeds
or chopped dried
cranberries, to serve

How our
food works
for you

see page 77

NUTRITION INFO

PER 100g

(approx. 1 small
apple, unpeeled):
240kJ, protein 0g,
total fat 0.2g (sat.
fat 0g), carbs 12g,
fibre 2g, sodium 1mg
• Carb exchanges 1
• GI estimate low
• Gluten free

GF



1 Put flours, sugar, margarine and oil in a small food processor. Pulse until the mixture is well combined. Add the water, 1 Tbsp at a time, pulsing, until

the mixture starts to come together to form a ball. Press into a disc, wrap in plastic wrap and place in the fridge for 30 minutes to rest.

2 Meanwhile, combine the honey and thyme in a small microwave-safe bowl. Cook on high/100% for 30 seconds. Set aside to cool. Remove and discard the thyme leaves.

3 Preheat oven to 200°C (fan-forced). Combine the infused honey, lemon juice and 2 tsp of extra plain flour in a medium bowl. Add the apples and toss to coat.

4 Roll the pastry out on a piece of lightly floured baking paper to form a 30cm circle. Slide the paper and pastry onto a large baking tray. Mound the apple mixture in the centre of the pastry, leaving the outer 5cm uncovered. Fold the uncovered pastry over the filling, pleating as needed. Lightly brush pastry with egg white and sprinkle with demerara sugar, if using.

5 Bake for 35 minutes or until apples are tender and pastry is golden brown. Set aside for 15 minutes to cool slightly. Sprinkle with the pomegranate seeds and extra thyme leaves. Cut into 10 wedges, to serve.

COOK'S TIP

You will need about 230g (2-3) apples to make 2 cups thinly sliced apples.



Sweet or savoury, apples are the most versatile fruit



SLOW-COOKER PORRIDGE WITH APPLES AND WALNUTS

PREP TIME: 20 MINS
COOK TIME: 6 HOURS
SERVES 4 (AS A BREAKFAST)

500ml (2 cups) skim milk
500ml (2 cups) water
90g (1 cup) rolled oats
45g (¼ cup) brown sugar,
plus 1 tsp extra
2 Tbsp light margarine
1 tsp vanilla extract
½ tsp ground cinnamon
¼ tsp ground nutmeg
5 cups chopped apples
(see Cook's Tip)
2 tsp canola oil
1 tsp fresh lemon juice
80g (¾ cup) walnut pieces,
chopped

1 Put the milk, water, oats, sugar, margarine, vanilla extract, cinnamon, nutmeg and 2 cups of chopped apple in a 4–5L slow cooker. Cover and cook on low for 6–8 hours.

2 When porridge is almost ready, preheat oven to 220°C (fan-forced). Toss remaining apples with the oil. Roast for 10–12 minutes or until golden brown, stirring once. Stir in extra brown sugar and juice.

3 To serve, top the porridge with the apple topping and walnuts.

COOK'S TIP

To prevent the apple from browning, store the remaining apple for the topping in a mixture of 500ml (2 cups) water and 2 Tbsp of fresh lemon juice in the fridge while the porridge is cooking in the slow cooker



SPICED APPLE CAKE

PREP TIME: 40 MINS
COOK TIME: 1 HOUR 15 MINS
SERVES 16
(AS AN OCCASIONAL DESSERT)

Non-stick cooking spray
150g (1 cup) plain flour
120g (¾ cup) wholemeal plain flour
160g (⅔ cup) caster sugar or granulated sugar substitute
1½ tsp bicarbonate of soda
1 tsp mixed spice, plus extra to serve (optional)
60g egg, lightly whisked
1 egg white (from 60g egg), lightly whisked
3 Tbsp light margarine, melted
2½ Tbsp canola oil
4 cups peeled and chopped apples (see Cook's Tips)
1 Tbsp light margarine, extra
1½ cups very thinly sliced unpeeled apples (see Cook's Tips)
1–2 Tbsp water
2 tsp maple syrup

1 Tbsp whisked vanilla frûche, per serve

1 Preheat oven to 160°C (fan-forced). Spray a 20cm (base measurement) square cake tin with cooking spray. Line tin with baking paper, allowing paper to overhang the sides.

2 Combine the flours, sugar, bicarbonate of soda and mixed spice in a large bowl. Add egg, egg white, melted margarine and oil. Mix until well combined. Stir in chopped apples. Spoon mixture into prepared tin. Bake for 45 minutes or until a skewer inserted into cake comes out clean. Set aside in pan for 10 minutes before transferring to a wire rack.

3 Meanwhile, melt the extra 1 Tbsp margarine in a large non-stick frying pan over medium heat. Add sliced apples and cook, stirring often, for 8–10 minutes or until apples are tender and golden, adding 1 Tbsp water every 4 minutes, and stirring until it evaporates. Remove pan from heat and stir in maple syrup.

4 Cut cake into squares. Top with the pan-fried apple slices and frûche. Sprinkle with a little extra mixed spice, if you like.

COOK'S TIPS

▶ You will need about 530g (about 5) apples to give you 4 cups peeled and chopped apples and 170g (about 1½) apples to give you 1½ cups thinly sliced apples.

▶ Keep the cake in an airtight container in the fridge for up to 3 days. ■

mains

GRILLED *chicken*

It's easy to get into a chicken breast rut. So hit the grill and fire up your palate with these tasty flavour profiles

How our
food works
for you
see page 77

NUTRITION INFO
PER SERVE 1890kJ,
protein 36g, total
fat 18.3g (sat. fat
2.0g), carbs 27g,
fibre 8g, sodium
118mg • Carb
exchanges 2
• GI estimate low



CHICKEN SOUVLAKI SKEWERS

PREP TIME: 45 MINS
(+ 1½ HOURS MARINATING)
COOK TIME: 15 MINS
SERVE 4 (AS A MAIN)

80ml (⅓ cup) dry white wine
60ml (¼ cup) fresh lemon juice
60ml (¼ cup) canola oil
2 tsp dried oregano, crushed
4 cloves garlic, crushed
Freshly ground black pepper
500g skinless chicken breast fillet,
trimmed of fat, cut into
1½ cm-thick strips
1 small fennel bulb, trimmed,
thinly sliced
Lemon wedges, to serve

Mediterranean couscous

1 tsp olive oil
60g (½ cup) Blu Gourmet
Pearl Couscous
250ml (1 cup) water
½ cup shredded sun-dried
tomatoes (not packed in oil)
1 small red capsicum, chopped
1 Lebanese cucumber, chopped
1 small red onion, chopped
90g (⅓ cup) fat-free Greek-style
natural yoghurt
¼ cup shredded basil leaves
¼ cup shredded flat-leaf parsley
1 Tbsp fresh lemon juice
Freshly ground black pepper

1 Whisk wine, lemon juice, oil,
oregano, garlic and pepper in
a small bowl. Set aside 60ml
(¼ cup) of marinade.

**2 Combine chicken
and fennel** in
a resealable
plastic bag
and put in
a shallow
dish.

Add remaining
marinade. Seal and
turn to coat. Put in
fridge for 1½ hours to
marinate, turning bag once.

3 To make couscous, heat oil in a
small saucepan over medium heat.
Add couscous and cook, stirring,
for 2 minutes or until couscous is
lightly toasted. Add water. Bring
to boil. Reduce heat to low. Cook,
covered, for 10 minutes, or until
couscous is tender and liquid is
absorbed, adding tomatoes
for last 5 minutes of cooking.
Transfer to a large bowl and
set aside to cool. Add the
rest of the ingredients to
couscous and toss
to combine. Set aside.

4 Drain the chicken,
discarding marinade
and fennel. Thread
onto 8 x 25-30cm
metal or wooden
skewers (see Cook's Tip).

**5 Preheat a barbecue
grill** on medium-high.
Add chicken skewers.
Cook for 6-8 minutes,
turning once, or until
cooked through.

6 Brush skewers with
reserved marinade.
Serve with couscous
and lemon wedges.

COOK'S TIP

If using wooden skewers, soak in
water for 30 minutes to prevent
burning. Drain well before using. ➤

Timing is key

Marinades tenderise lean
cuts like chicken breast. Just
keep in mind that marinating
too long in acidic ingredients
can cause rubbery meat,
so follow the recipe
times closely.



MAPLE-BOURBON CHICKEN WITH CHEESY SWEET POTATO

GFO

PREP TIME: 25 MINS
(+ 8 HOURS MARINATING)
COOK TIME: 40 MINS
SERVES 4 (AS A MAIN)

2 Tbsp bourbon or apple cider
2 Tbsp pure maple syrup
1 Tbsp salt-reduced soy sauce
or gluten-free soy sauce
3 cloves garlic, crushed
2 tsp Dijon mustard
or gluten-free mustard
Pinch ground chillies
2 x 250g skinless chicken breast
fillets, trimmed of fat
2 bunches broccolini, trimmed,
steamed, to serve

Sweet potato parcels

500g orange sweet potato,
peeled and sliced
1 large brown onion, peeled, sliced
5 slices Weight Watchers 97%
fat-free bacon, finely chopped
and cooked (see Cook's Tip)
3 Tbsp light margarine
60g (½ cup) reduced-fat
grated cheese

1 Put the bourbon, maple syrup, soy sauce, garlic, mustard and ground chillies in a small screw-top jar. Cover and shake to combine. Put chicken in a large resealable plastic bag in a shallow dish. Pour marinade over the

chicken. Seal and turn to coat. Put in the fridge for 8 hours or overnight, to marinate, turning once during that time.

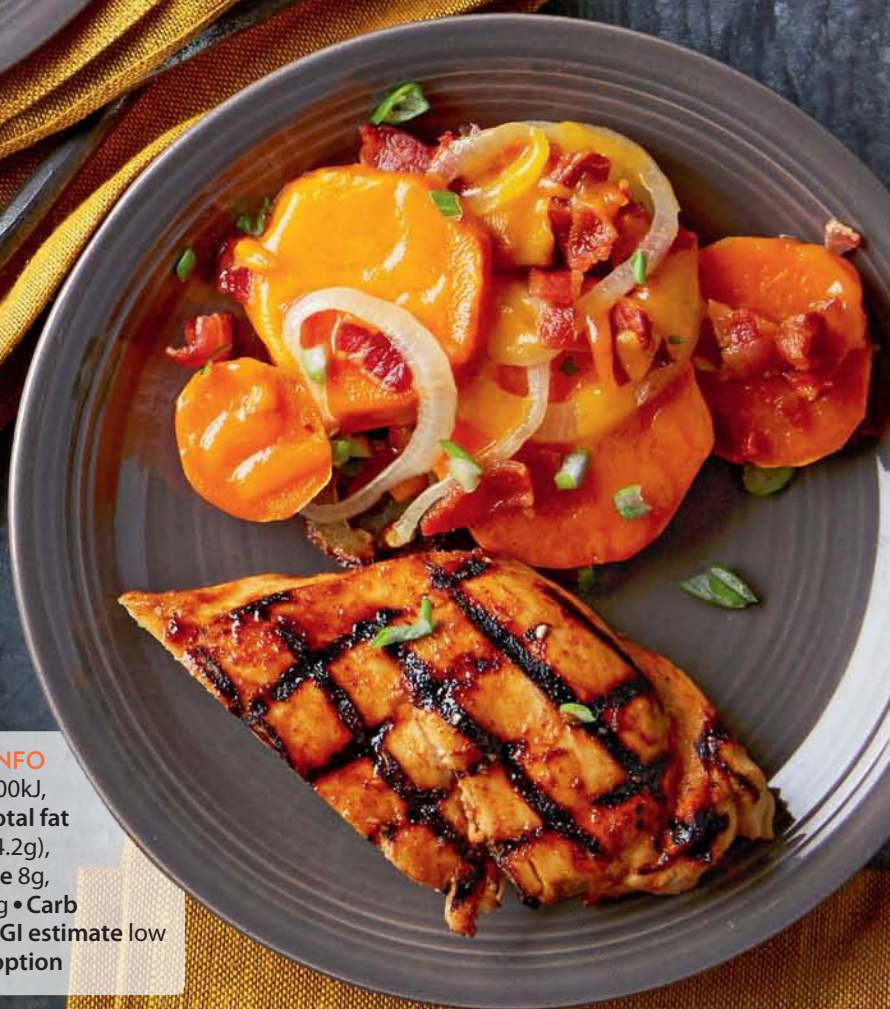
2 To make sweet potato parcels, preheat barbecue grill on medium. Put sweet potato in the middle of a double layer of 45cm piece of foil. Top sweet potato with onion and bacon. Top with margarine. Bring up sides of the foil and fold over to enclose potatoes. Put potato parcels on the grill, cover and cook for 30-40 minutes or until potato is tender. Remove packet from grill and carefully open foil. Sprinkle over the cheese. Fold foil over to enclose. Set aside.

3 Meanwhile, remove chicken from the marinade and discard marinade. Add chicken to the grill and cook for 4-5 minutes each side, or until cooked through.

4 To serve, cut each breast in half crossways and serve with the cheesy sweet potato and broccolini.

COOK'S TIPS

► Halfway through cooking each side, use tongs to move chicken breasts a quarter turn to make grillmaster-style crosshatching.
► To cook bacon, heat a small non-stick frying pan over medium heat. Add bacon and cook, stirring often, for 5-6 minutes or until the bacon is crispy. Transfer to a plate lined with paper towel. ►



NUTRITION INFO
PER SERVE 1800kJ,
protein 44g, total fat
11.4g (sat. fat 4.2g),
carbs 27g, fibre 8g,
sodium 762mg • Carb
exchanges 2 • GI estimate low
• Gluten-free option





NUTRITION INFO

PER SERVE 1820kJ, protein 35g,
total fat 13.5g (sat. fat 1.7g), carbs
38g, fibre 8g, sodium 440mg

- Carb exchanges 2½
- GI estimate medium
- Gluten-free option



JERK CHICKEN WITH CARIBBEAN RICE

PREP TIME: 25 MINS
(+ 8 HOURS MARINATING)

COOK TIME: 15 MINS

SERVES 4 (AS A MAIN)

GFO

2 Tbsp canola oil
2 Tbsp red wine vinegar
2 Tbsp fresh orange juice
2 Tbsp thinly sliced green shallots
1 Tbsp brown sugar
1 Tbsp salt-reduced soy sauce
or gluten-free soy sauce
½ long green chilli, seeds
removed, finely chopped
3 cloves garlic, crushed
2 tsp Cajun spice mix
500g skinless chicken breast
fillets, trimmed of fat
Lime wedges, to serve

Caribbean rice

Cooking spray
½ cup peeled and chopped fresh
pineapple flesh
1 small green capsicum, chopped
½ long green chilli, seeds removed,
finely chopped
¼ tsp garlic powder
Freshly ground black pepper
Pinch ground cinnamon
420g can no-added-salt red kidney
beans, rinsed and drained

250g packet cooked
brown rice

60ml (¼ cup) fresh orange juice
¼ cup chopped coriander

1 Put the oil, vinegar, orange juice, shallots, sugar, soy sauce, chilli, garlic and Cajun spice mix in a small screw-top jar. Shake well to combine. Put the chicken in a large resealable plastic bag in a shallow dish. Pour the marinade over the chicken. Seal and turn to coat. Put in the fridge for 8 hours or overnight, to marinate, turning once during that time.

2 To make Caribbean rice, spray a medium non-stick frying pan with cooking spray. Heat pan over medium-high heat. Add pineapple, capsicum, chilli, garlic powder, pepper and cinnamon. Cook, stirring, for 5 minutes or until pineapple is just tender and the spices are fragrant. Add kidney beans, brown rice and orange juice. Cook, stirring, for 2-3 minutes, or until heated through. Stir in the coriander.

3 Preheat barbecue grill on medium. Drain chicken, reserving the marinade. Add chicken to the grill and cook for 4-5 minutes each side, or until cooked through.

4 Meanwhile, transfer reserved marinade to a small saucepan. Bring to the boil over high heat. Reduce heat to medium and simmer, uncovered, for 10 minutes or until reduced to about 60ml (¼ cup).

5 Thickly slice the chicken and serve over the rice with lime wedges. Drizzle with the glaze and serve. ■



Fast Ed it's a wrap

BHG TV's 'Fast Ed' Halmagyi shares a delicious Middle Eastern meal that will satisfy the whole gang and tick all the boxes

▶▶ Feeding the family doesn't have to be a chore, especially when it's as delicious as these simple wraps. Oh, and one tip... so it doesn't feel like a cafe lunch, but a loving family dinner, serve it at the table as a do-it-yourself adventure. That will make it an easy family dinner that everyone will enjoy and remember.

LEBANESE SPICED LAMB WRAPS WITH QUINOA TABOULI

PREP TIME: 15 MINS (PLUS RESTING)

COOK TIME: 20 MINS

SERVES 4 (AS A MAIN)

500g lamb backstraps,
trimmed of fat
2 tsp ground turmeric

2 tsp ground cumin
1 tsp ground cinnamon
½ tsp ground allspice
Freshly ground black pepper
1½ Tbsp extra virgin olive oil
2 pieces Pittes Lite Souvlaki & Pizza
¾ cup quinoa
250ml (1 cup) salt-reduced
chicken stock
250ml (1 cup) water
2 bunches parsley, finely chopped
½ bunch coriander, leaves chopped
2 green shallots, finely sliced
4 tomatoes, seeded, finely chopped
1 red onion, finely chopped
2 cloves garlic, crushed
Juice of 1 lemon
4 Tbsp tzatziki
4 Tbsp hummus

1 Rub lamb with spices. Season with pepper. Set aside for 1 minute. Drizzle 2 tsp of oil over lamb.

2 Heat chargrill pan on medium-high. Cook lamb for 8-9 minutes, turning several times, for medium-rare. Transfer to plate, cover loosely with foil. Set aside for 10 minutes. Add pittes to the chargrill and cook for 1-2 minutes each side, to warm through. Wrap in foil and set aside.

3 Meanwhile, place quinoa, stock and water in a medium saucepan. Bring to the boil over a high heat. Cook for 5 minutes. Turn heat to low, cover and cook for a further 5 minutes. Turn off heat and set aside for 5 minutes. Use a fork to fluff the quinoa. Transfer to a bowl.

4 Add the parsley, coriander, shallots, tomato, onion, garlic, lemon juice and remaining oil to the quinoa. Toss to combine.

5 Slice lamb and serve with the tabouli, tzatziki, hummus and half a pitte each. ■



SEE MORE OF 'FAST ED'

For more great recipes, as well as tips for decorating your home, sprucing up your garden, looking after your pets and boosting your wellbeing, buy *Better Homes and Gardens* magazine and watch the *BHG TV* show on Channel 7. Check your TV guide for scheduling information.



How our
food works
for you
see page 77

NUTRITION INFO

PER SERVE 2480kJ,
protein 41g, total fat 23g
(sat. fat 5g), carbs 49g,
fibre 11g, sodium 578mg
• Carb exchanges 3½
• GI estimate medium

Plan your week,

Wondering what to eat this week? Try these delicious meal ideas

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY
				
H₂O	Start each day with a glass of water. You should have 6–10 glasses a day			
Breakfast	Grapefruit, passionfruit & strawberry fruit salad (page 75)	Slow-cooker porridge with apples & walnuts (page 63)	1 cup fruit salad & ¾ cup low-fat Greek-style natural yoghurt	Egg & turkey scramble (page 50) 
Optional snack	40g fruit & nut mix	1 wholemeal crumpet toasted with 2 tsp 100% fruit jam	30g unsalted nuts	175g tub Yoplait Forme yoghurt
Lunch	Chicken & broccoli salad with buttermilk dressing (page 40), & a small skim cappuccino	Pick & mix your work-day lunches with these 4 easy steps: 1. Choose 2 slices wholegrain bread OR 1 wholegrain wrap OR 1 small wholegrain roll 2. Add a protein: 80g chicken or turkey breast, 95g can tuna/salmon, 1–2 boiled eggs or 40g reduced-fat cheese ►►		
Optional snack	Creamy crab & corn bites (page 24)	1 piece fresh fruit 	Celery & capsicum sticks with 2 Tbsp hummus	40g fruit & nut mix
Dinner	Chilli con carne (page 54) <i>Pictured above</i>	Chicken souvlaki skewers (page 65) <i>Pictured above</i>	Steak & chimichurri salad (page 46) with a small soy & linseed roll <i>Pictured above</i>	Hummus, chargrilled vegetable & prawn pizza (page 30) <i>Pictured above</i>
Alcohol	If you choose to drink, stick to 1–2 standard drinks per day. It's also a good idea to			
Optional dessert	1 cup fruit salad 	1 cup skim milk mixed with 1 tsp Milo	6 slices tinned peaches with ½ cup low-fat custard	1 piece fresh fruit
Exercise	Aim for 20–60 minutes of moderate exercise each day.			

it's easy!



Easter gift giving

Chocolate eggs and bunnies are traditionally given to celebrate Easter. But these are generally very high in kilojoules, sugar and fat, especially saturated fat, making your waistline and blood glucose levels difficult to manage.

This year, try thinking outside the box to give your loved ones a small gift that will help improve their health rather than hinder it.

Our top picks for healthy Easter gift giving:

- **Herb or chilli plants** – the gift that keeps on giving all year long! Loaded with antioxidants and adding a punch of flavour to your cooking.
- **Fresh fruit and vegetable baskets** – visit your farmers' market to pick up delicious and locally sourced produce.
- **Decorative jars filled with mixed nuts** – nuts are an excellent source of healthy fats, protein and fibre, and just 30g makes a perfect treat that can be enjoyed daily.
- **Hand-painted hard boiled eggs** – this makes for a great Easter activity with the kids! Hard boil your eggs and cool. Dip in food colouring or get creative with your own designs.
- **Choose quality over quantity** – if you insist on giving chocolate eggs, opt for small, dark quality chocolate varieties. ■

THURSDAY



FRIDAY



SATURDAY



depending on your exercise levels

Coconut & fig porridge (page 75)

½ cup natural muesli mixed with ½ cup low-fat Greek-style natural yoghurt & ½ cup mixed berries

2 poached eggs with 1 slice wholegrain toast



1 piece fresh fruit



Small skim latte & 2 fresh dates

175g tub Yoplait Forme yoghurt

3. Add as much salad/vegetables as you can (this will add extra nutrients and fibre to fill you up)
4. Enjoy fresh or toasted!

Warm potato & sprout salad with lemon vinaigrette (page 45) & 1 piece fresh fruit

30g unsalted nuts



Carrot & celery sticks with 2 Tbsp hummus

8 brown rice crackers & 40g reduced-fat cheddar

Chicken & corn nachos (page 24)
Pictured above

Seared sesame tuna with fennel & apple slaw (page 42)
Pictured above

Seared pork chops with apples & onions (page 61)
Pictured above

have a couple of alcohol-free days a week

1 x 38g Bulla Mini Frozen Yoghurt stick

Self-saucing passionfruit & coconut pudding (page 38)

Pineapple with honeyed yoghurt & granola (page 54)

Always discuss your exercise plans with your doctor first

This menu planner has been created by a dietitian and exercise physiologist for the average person with diabetes. If you have special needs, please consult your own dietitian. Check the product packaging or the nutrition info boxes near our recipes for nutritional analysis.

Choice of champions

A berry smoothie, speedy brekkie ideas, beneficial pasta and salad tips from our food editor, *Alison Roberts*

SUPERMARKET CRUSH

Pasta – feel the pulse!

Look out for the San Remo Pulse Pasta range, which uses flour made from various pulses (peas, lentils, chickpeas and borlotti beans) instead of wheat. These pastas are higher in protein and fibre, and lower in carbohydrate, than traditional wheat pasta – and are also gluten-free! RRP \$3.99 for a 250g box. Available from Woolworths or independent supermarkets.



MIXED BERRY SMOOTHIE

185ml (¾ cup) Ocean Spray®

GF

Light Cranberry Fruit Drink

¾ cup frozen mixed berries (strawberries, raspberries, blackberries or blueberries)

170g tub low-fat, berry-flavoured yoghurt

½ banana, sliced

1 Combine all ingredients in a blender.

Blend for a few seconds on high speed or until ingredients are thoroughly combined. Pour into 2 glasses.

PER SERVE 518kJ, protein 5g, total fat 0.9g (sat. fat 0.5g), carbs 22g, fibre 2g, sodium 74mg

• Carb exchanges 1½

• GI estimate low • Gluten free





KITCHEN TIP

Keep it green

If you find that your salad greens (these include salad leaves, spinach and rocket) don't keep for very long in the fridge, try these simple tips to extend their life.

- **Wrap the greens in damp paper towel** or a damp, clean tea towel. Place in a plastic bag or airtight container and keep in the fridge for 4–5 days, changing the paper towel or rinsing out the tea towel every 2 days. This will help keep your greens fresh for as long as possible.
- **Don't wash your greens** before you store them — simply rinse them when you are ready to use whatever amount you need.



Cooking with love provides food for the soul.

QUICK BREKKIE IDEAS

BAKED BEAN, CHEESE AND SPINACH TOASTIE

Top one piece **wholemeal bread** with ½ cup **baby spinach** or **rocket leaves**. Top with ⅓ cup **reduced-salt baked beans** and 1½ Tbsp **reduced-fat grated cheese**. Top with another slice of **bread**. Cook in a sandwich maker until toasted. Serve with a small **skim latte**. Serves 1.

PER SERVE 1700kJ, protein 27g, total fat 8.3g (sat. fat 2.3g), carbs 48g, fibre 11g, sodium 773mg • Carb exchanges 3 • GI estimate low



GRAPEFRUIT, PASSIONFRUIT & STRAWBERRY FRUIT SALAD

Combine the flesh of ½ **grapefruit**, 2 **passionfruit** and 1 x 250g punnet **strawberries**, hulled and halved in a bowl. Top with 2 Tbsp **low-fat Greek-style yoghurt** and 2 Tbsp **Crunchola cereal**. Serves 1.

PER SERVE 887kJ, protein 8g, total fat 3.8g (sat. fat 0.9g), carbs 30g, fibre 10g, sodium 63mg • Carb exchanges 2 • GI estimate low



COCONUT AND FIG PORRIDGE

Cook 45g (½ cup) **rolled oats** with 250ml (1 cup) So Good **Unsweetened Almond & Coconut Milk** in a small saucepan over medium heat for 4–5 minutes or until the **oats** are tender. Chop 1 **fig** and place on top of the **porridge** with 1 tsp **pumpkin seeds** and a drizzle of **honey**. Serves 1.

PER SERVE 1310kJ, protein 8g, total fat 14.1g (sat. fat 6.5g), carbs 36g, fibre 6g, sodium 66mg • Carb exchanges 2½ • GI estimate low ■



FISH WITH SMOKED PAPRIKA AND PARMESAN WEDGES

PREP TIME: 10 MINS

COOK TIME: 25 MINS

SERVES 2 (AS A MAIN)

2 tsp extra virgin olive oil
2 x 150g pieces firm white fish fillets
1 Tbsp fresh lemon juice
2 tsp finely chopped dill
½ tsp Dijon mustard
Freshly ground black pepper
2 cups mixed salad leaves
1 Lebanese cucumber, sliced

1 large tomato, cut into wedges
50g snow peas, diagonally sliced

Smoked paprika and parmesan wedges

500g **Spud Lite Potatoes**, unpeeled, cut into wedges
2 tsp extra virgin olive oil
1 Tbsp finely grated parmesan
1 tsp smoked paprika

1 To make the smoked paprika and parmesan wedges, preheat oven to 210°C (fan-forced). Line a baking tray with baking paper. Pat the wedges dry with paper towel. Put the potato wedges, oil, parmesan and paprika in a medium bowl. Toss to combine. Arrange the wedges in a single

layer on the lined tray. Bake for 20-25 minutes, turning the wedges over once, or until the parmesan is golden and the potato is tender.

2 Meanwhile, heat 1 tsp of the oil in a medium non-stick frying pan over medium heat. Add the fish and cook for 3 minutes each side, or until cooked through. Whisk the lemon juice, dill, mustard, pepper and remaining oil in a small bowl. Set aside.

3 Toss the salad leaves, cucumber, tomato and snow peas in a bowl. Divide the wedges, fish and salad between serving plates. Drizzle dill and lemon vinaigrette over the fish and serve. ■

Potato wedges

NUTRITION INFO

PER SERVE 1770kJ,
protein 38g, total
fat 13.9g (sat. fat
3g), carbs 29g,
fibre 8g, sodium
277mg • Carb
exchanges 2
• GI estimate
medium



Our food explained

Every recipe in *Diabetic Living* is carefully created to help you enjoy a healthy, balanced diet

▶ Our Nutrition Info boxes sit alongside each recipe. Use them to track your nutritional requirements, as well as count carbs, carb exchanges and find out whether a recipe is low-, medium- or high-GI, or gluten free. Easy! **Shannon Lavery, Dietitian, Alison Roberts, Food Editor**

YOUR DAILY ALLOWANCE GUIDE

With this guide, you can create the perfect eating plan for your needs

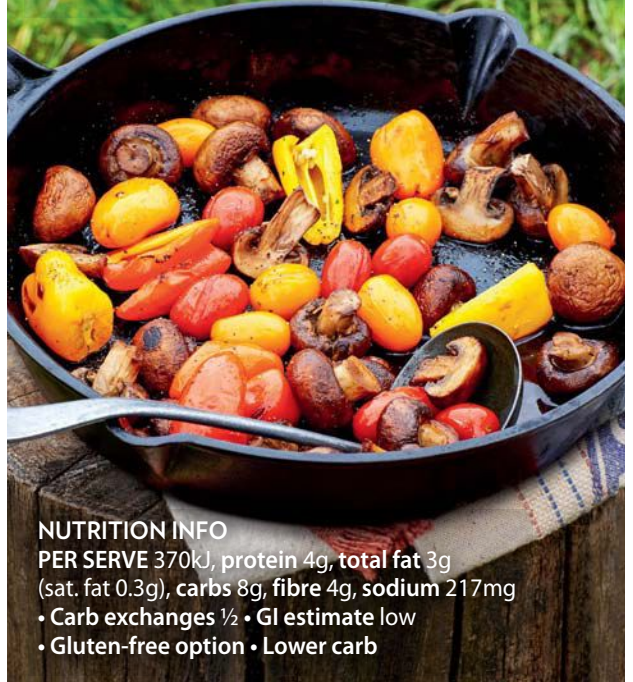
To maintain your weight*	To lose weight*
Kilojoules 8700kJ	Kilojoules 6000kJ
Protein 80g	Protein 65g
Total fat 70g	Total fat 45g
Saturated fat 24g	Saturated fat 15g
Carbs 270g	Carbs 180g
Fibre 30g	Fibre 30g
Sodium Less than 2000mg	Sodium Less than 2000mg

* These figures are a guide only. To find out your individual nutritional needs, please see your dietitian.

CUT OUT & KEEP

PAN-ROASTED CAMP-FIRE VEGIES

see recipe, page 52>>



NUTRITION INFO

PER SERVE 370kJ, protein 4g, total fat 3g (sat. fat 0.3g), carbs 8g, fibre 4g, sodium 217mg
• Carb exchanges ½ • GI estimate low
• Gluten-free option • Lower carb

Serves 2 (as a main)

We show you whether a food is designed to be a between-meals snack, breakfast, lunch (a lighter main) or dinner (the main meal of the day). When we say, "as an occasional dish", it should only be eaten as a treat, such as once a fortnight.

Brand names

We sometimes use product names so it's easy for you to find nutritionally suitable brands when shopping.

Optional ingredients

Whenever we list an ingredient as optional, it isn't included in the nutrition analysis and it's up to you if you want to use it.

Sugar or sugar substitute

In some dishes, you can use either sugar or a sugar substitute. In these cases, we give you the nutrition analysis for both.

Choice of ingredients

When we give you the choice of two different ingredients, we analyse only the first one.

Carb exchanges

Using exchanges makes counting your carbs easier: one exchange = 15g of carbs. Aim for 1-2 exchanges in every snack and 1-4 exchanges in each meal. ■

BECOME A HOST FOR HOPE

Every day, four Australian women will be diagnosed with ovarian cancer and there is no early detection test. But there is hope.

Become an Afternoon Teal host in 2018 to help Ovarian Cancer Australia create a brighter future for Australian women. Invite your friends, family and community to raise funds and awareness of this disease.



Karen and Nicole Livingstone,
co-founders of Ovarian Cancer Australia.

Register now at www.afternoontea.net.au
ovariancancer.net.au | 1300 660 334



living well

MOTIVATION ♦ EXPERT ADVICE ♦ INSPIRATION

*Keep your eyes on the
stars and your feet
on the ground.*

— Theodore Roosevelt



10 REASONS FOR blood sugar SWINGS

You eat right, test often, yet still have highs and lows. Find out if one of these culprits is keeping you on the up and down

1 ***Sugary drinks***
Special coffee drinks can pack in carbs, causing spikes.
To do: Know the ingredients. Limit added sugars to 6 tsp/day for women and 9 tsp/day for men.

2 Improper control

Routinely checking blood sugar levels, taking correct medication doses and meeting healthy lifestyle recommendations all play their part in keeping your numbers in control. Being lax with any of these can trigger highs and lows –

and when you have poor control, you might lose sensitivity to both.

To do: Pay attention to your diabetes and record day-to-day changes. This gives you more lead time before a high or low takes effect and also gives you a much better picture of your overall health.

3

Medication mistakes

A medication error can cause a rapid blood sugar swing. Make sure you understand instructions and proper dosage before you leave your doctor's office or pharmacy.

To do: Prevent incorrect dosing by asking questions during your doctor's visit and taking note of the recommended routine when you're at the pharmacy.



need to know



4 Illness

Coming down with a bug is tough on anyone's body, but for people with diabetes, it can also mean spikes in sugar levels. When you're sick – anything from the flu to food poisoning – the stress prompts hormones to fight the problem in your body, causing the liver to release extra sugar.

To do: Stay hydrated and check blood glucose more often when you're sick to catch highs on their way up.

5 Inaccurate counting

Eyeballing portions and miscalculating carbs – which might lead to inaccurate insulin doses – can be a top cause of blood sugar swings.

To do: Use measuring cups and spoons for a while to retrain your portion know-how. In a pinch, use accurate comparisons for your favourite foods. A meat, fish or poultry serving is palm-size. Thirty grams of hard cheese is equal to three dice. Milk, yogurt or vegetable serving? A tennis ball.

6 Irregular carbs

Spreading your carbs throughout the day keeps your blood sugar levels steady. Eating all of a day's carbs in one sitting may cause a spike. If you're on fixed-dose insulin or a fixed medication, consistent carb intake is the key.

To do: Try to stick to a consistent routine when it comes to eating carbohydrates, or talk to your provider about adjusting your meds.



7 Major stress

Sudden bouts of stress – physical, mental or emotional – can cause blood sugar to spike or drop. ➤

need to know

8 *Your period*

Ladies, you might see flutters in your blood sugar readings around that time of the month. Changing hormones in your body during a period can raise your blood sugar.

To do: Take note of timing and blood sugar when you're having your period. If you use insulin or other diabetes medication, consider consulting your health care professional or CDE about possible changes to your management routine during that time.

DID YOU KNOW?

Disposable water bottles are hard on the earth.

Use a glass or BPA-free vessel.



9 *Intense exercise*

Lows during exercise are more common for people on insulin or blood-glucose-lowering meds. But doing high-intensity workouts that push the body out of its comfort level can cause lows and highs, too.

To do: Increase the length and intensity of your physical activity incrementally. Take breaks to check your blood sugar as needed. If on insulin or blood-glucose-lowering meds, adjust dosage and snacking accordingly.

10 *Dehydration*

Are you getting enough water? If not, you could experience blood sugar swings because dehydration concentrates sugar in your bloodstream.

To do: Drink plenty of water right throughout the day. Your urine should be clear, or close to it, if you're drinking enough.

Water Bottle: Lifefactory 650ml Glass Bottle with Silicon Sleeve, \$24.99; amazon.com.



HOW TO CONTROL ON THE GO

Eat mindfully.

You can enjoy the foods you like, but if they're not so healthy, eat less of them.

Dress less.

Many carbs hide in salad dressings and sauces. Get them on the side, and control how much you use.

Be prepared.

If you'll be out all day, stash healthy snacks in your to-go bag. ■

CLEAR VISION *eyes have it*

Do PWDs need a different type of eye exam?

▶▶ Diabetes can affect every part of your eyes. Diabetic retinopathy is the most common eye disease in PWDs – your risk increases the longer you've had diabetes. Diabetic retinopathy affects the retina, which lines the inside back wall of the eye. Special tests can detect it early to protect your eyesight.

How it happens

Chronic high blood sugar can damage the retina's tiny blood vessels. They may develop balloon-like swellings and leak clear fluid. When this happens in the centre of the retina, it's called macular oedema, which causes blurry vision. Glasses can't correct this leading cause of vision loss in PWDs.

As retinopathy worsens, fragile new blood vessels may grow (called proliferative retinopathy). They tend to break, bleed and form scar tissue, which may pull on the retina. That can cause the

retina to detach from the back of the eye. If not treated early, this can result in total blindness.

How it's detected

In the earliest stages, there are typically no symptoms. Once they appear, a lot of damage may already have been done. Common symptoms: seeing floaters (cobweb-like lines or tiny red dots), blurry spots in the centre of vision, abnormal blind spots, and trouble seeing at night or in dim lighting.

Get a comprehensive dilated eye exam each year to protect your vision. The optometrist or ophthalmologist will use eye drops to make your pupils larger (dilate them), which allows the specialist to look at the retina in high detail. The specialist will also check for cataracts and glaucoma.

Treatment

For mild retinopathy, the best treatment is to manage your diabetes, cholesterol and blood pressure. If retinopathy is severe and your sight is at risk, a doctor may inject meds (anti-VEGF) into your eyes, laser surgery and/or put steroid meds into your eyes. ■

Protect your eyes

- Keep A1c below 7 per cent
- Lose excess weight
- Eat dark green, leafy vegetables, which are rich in retina-protective carotenoids
- Keep normal blood pressure
- Reach healthy cholesterol levels
- Exercise daily
- Treat sleep apnea (disrupted breathing), which is linked to glaucoma and worsening diabetic retinopathy
- Avoid smoking, which increases cataract risk
- Get a yearly eye exam

Why EAT healthy?



There are many benefits to eating healthy, especially when it comes to managing your blood glucose levels. We take a closer look at how the food you eat affects your diabetes.

What causes diabetes?

There is more than one reason a person can have diabetes, which is why there's more than one type of diabetes.

- **Type 1** diabetes is an autoimmune disorder in which the body destroys its insulin-producing beta cells. Without insulin, the body is unable to convert glucose into energy. People with type 1 need to inject insulin to live. Type 1 accounts for about 5 per cent of diabetes cases.
- **Type 2** diabetes has a number of causes, such as excess weight,

sedentary lifestyle and genetics. Type 2 diabetes can be caused when the body's muscle, liver and fat cells resist the effects of insulin, which causes a build-up of glucose in the blood. This is called insulin resistance.

Type 2 diabetes can also be caused by inadequate insulin secretion from beta cells in the pancreas. This is called insulin deficiency, which can be caused by genetics and sometimes by years of insulin resistance.

Many people who have type 2 diabetes have both insulin resistance and insulin deficiency.

WHAT HAPPENS WHEN I EAT?

"Before you had diabetes, your body was on autopilot," says Donna Starck, of UnityPoint Health in Des Moines, Iowa, US.

When you ate carbohydrate, your blood sugar would rise and your pancreas would respond with the right amount of insulin, a hormone that allows the body's cells to receive and use glucose for energy. With diabetes, your body requires assistance. This is because your body isn't making any insulin, isn't producing enough insulin, or can no longer properly use the insulin it produces. This is what happens when a person with type 2 diabetes eats carbohydrate:

1 Food goes down your oesophagus and into your stomach.

2 The digestive system quickly breaks down carbohydrate into glucose.

● **Pre-diabetes** means a person's blood glucose levels are higher than they should be – just not high enough to be diagnosed as type 2 diabetes.

If you have pre-diabetes, you can avoid a future diagnosis by eating healthier and exercising. According to Diabetes Australia, strong evidence shows type 2 diabetes can be prevented in up to 58 per cent of cases in people with pre-diabetes through eating well. The American Diabetes Association (ADA) similarly found that losing 7 per cent of your body weight can reduce your risk, and exercising moderately (such as a brisk walk or swim) for 30 minutes a day, five days a week.

How can I manage my diabetes?

To manage type 1 diabetes, you inject synthetic insulin into your body when you eat carbohydrates.

Type 2 diabetes is a little more complicated, but its progression can be managed by eating healthily, exercising, monitoring your blood glucose levels and taking medication.

All people with diabetes should have a team of health professionals, including

What should my blood glucose levels be?

TYPE 1:
BEFORE A MEAL:
4-8mmol/L
2 HOURS AFTER A MEAL:
less than 10mmol/L

TYPE 2:
BEFORE A MEAL:
6-8mmol/L
2 HOURS AFTER A MEAL:
6-10mmol/L

– but not limited to – an endocrinologist and certified diabetes educator (CDE). They will provide the knowledge you need to live well and prevent complications associated with high blood glucose levels.

It's also good to keep written references handy. That's why we're here. Read on for *Diabetic Living's* four-step plan for managing healthy eating.

What affects my blood glucose levels?

Carbohydrate will make your blood glucose rise, which is why it's important to learn how to count carbs.

But other factors such as stress, illness, infection, sleep disturbances, pain and being more sedentary than usual also increase blood glucose.

Exercise and some medications can bring blood glucose down.

How often should I check my blood glucose level?

When you're first learning to manage diabetes, check your BGLs several times a day.

Because the cost of diabetes supplies can really add up, you might not be able to check as often as you'd like. To get the best overall picture of how you're managing your diabetes, test at alternate times.

For example, test one day when you wake up (also called a fasting reading); the next day, test before a meal and then two hours after. This illustrates how food at a meal did or did not affect you.

Test at different times of the day so you learn how food intake, stress and other daily events impact your blood sugar. Keep track of your levels and what influenced them in a logbook.

Always discuss checking your blood glucose and appropriate blood glucose level goals with your healthcare team. ➤

3 Glucose enters the bloodstream.

4 The pancreas releases insulin in response to a build-up of glucose in the bloodstream.

5 Insulin tries to attach to the body's cell receptors, but is unable to bind properly to the receptors.

6 Glucose cannot enter the cell and so it continues to build up in the bloodstream.

7 The cells don't tell the pancreas that they can't let the glucose in, so the pancreas continues to release insulin in an effort to bring down blood sugar.



How TO EAT healthy

Add these healthy concepts to your routine. Over time you'll learn how to best manage your diabetes

1 COUNT CARBS

Just because you have diabetes doesn't mean you can't enjoy carbs. In fact, carbohydrate is an important nutrient that gives your body the energy it needs to function.

Know your number

Foods with carbohydrate have the greatest effect on your blood glucose levels. "Excessive carbohydrate consumption, even if it's healthy food, will raise blood sugar," says dietitian Dodi Gooding. This is why it's important to be aware of how much carbohydrate you are consuming. When counting carbs, think of 1 carb exchange as 15g of carbohydrate. As a general guide, aim to choose:

- **Main meal:** 2-4 carb exchanges per meal (30-60g of carbs).
- **Snack:** 0-2 carb exchanges per meal (0-30g of carbs).

Always consult your dietitian or primary care provider to find the right balance for you.



TWO TYPES OF CARBOHYDRATE

1. Sugar, also known as simple carbohydrate, can be found naturally in fruit and milk. It is also added to many foods during processing.



2. Starch includes grains such as rice, bread and pasta; starchy vegetables such as corn, peas and potatoes; and dried beans and lentils.



“Having diabetes means you can eat what you want, but it's all about quantity,” says Gooding.

SPREAD OUT

Eating a day's worth of carbs in one sitting can cause a huge jump in blood glucose, while skipping a meal might push blood glucose too low. Spreading the carb load throughout the day prevents blood glucose fluctuations.

Always watch your portions. You might be doubling your carb count and then spiking your blood glucose levels.



Nutrition information			
Servings per package: 1			
Serving size: 750ml			
Ave. Quantity	per serving	%DI*	per 100ml
Energy	299kJ	3	40kJ
	71 Cal	3	9.5Cal
Protein	0g	0	0g
Fat, total	0g	0	0g
- saturated	0g	0	0g
Carbohydrates	17g	5	2.2g
- sugars	17g	18	2.2g
Sodium	140mg	6	19mg

*% DAILY INTAKE PER SERVE IS BASED ON AN AVERAGE ADULT DIET OF 8700KJ. YOUR DAILY INTAKE MAY BE HIGHER OR LOWER DEPENDING ON YOUR ENERGY NEEDS

2 READ LABELS

Learning to read food labels will help you make smarter food choices. Labels are a great tool for counting kilojoules and carb and fat grams.

Serving size

Always note the serving size on a food label. Just because a food appears to be packaged for individual consumption doesn't mean it contains a single serving. Depending how much of one food or drink you consume, you may need to multiply kilojoules and carbohydrate grams by two or three, or consider eating a smaller portion.

KILOJOULES

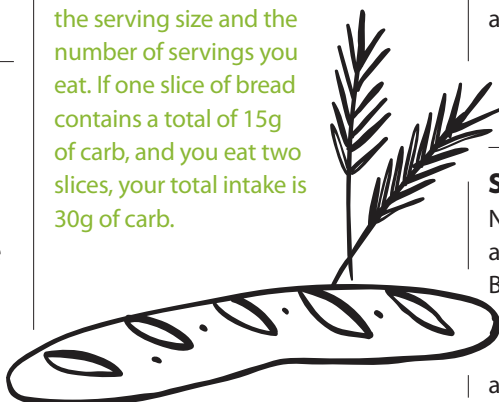
When trying to lose or maintain weight, kilojoules are key. Your healthcare provider, CDE or Accredited Practising Dietitian (APD) can figure out a healthy daily intake. Keep track in a logbook.

TOTAL FAT

Total fat includes all the fats – good and bad – in the packaged food. Look for foods that are low in saturated fat – this type may increase your risk of heart disease. "Saturated fats turn hard at room temperature, and essentially that's what they're doing in your arteries," says Gooding. Eating any type of fat in excess can cause weight gain, a factor in insulin resistance. A healthcare provider can determine the right amount for you.

TOTAL CARBS

Your carb count comes from "total carbohydrate". This is the total of all types of carbohydrate, which includes starches and sugars (natural and added). Calculate carbs based on the serving size and the number of servings you eat. If one slice of bread contains a total of 15g of carb, and you eat two slices, your total intake is 30g of carb.



SODIUM

The National Health and Medical Research Council (NHMRC) advises limiting sodium intake to **2000mg a day**. If you have, or are at risk for, hypertension, further reduction should be individualised. Gooding recommends buying fresh or frozen vegetables over canned foods. Instead of buying deli meat in a package, get it freshly sliced at the meat counter.

DIETARY FIBRE

Fibre helps you feel full longer, so always compare food labels and pick the one with the most fibre. Servings with more than 3g of fibre are a good bet.

SUGARS

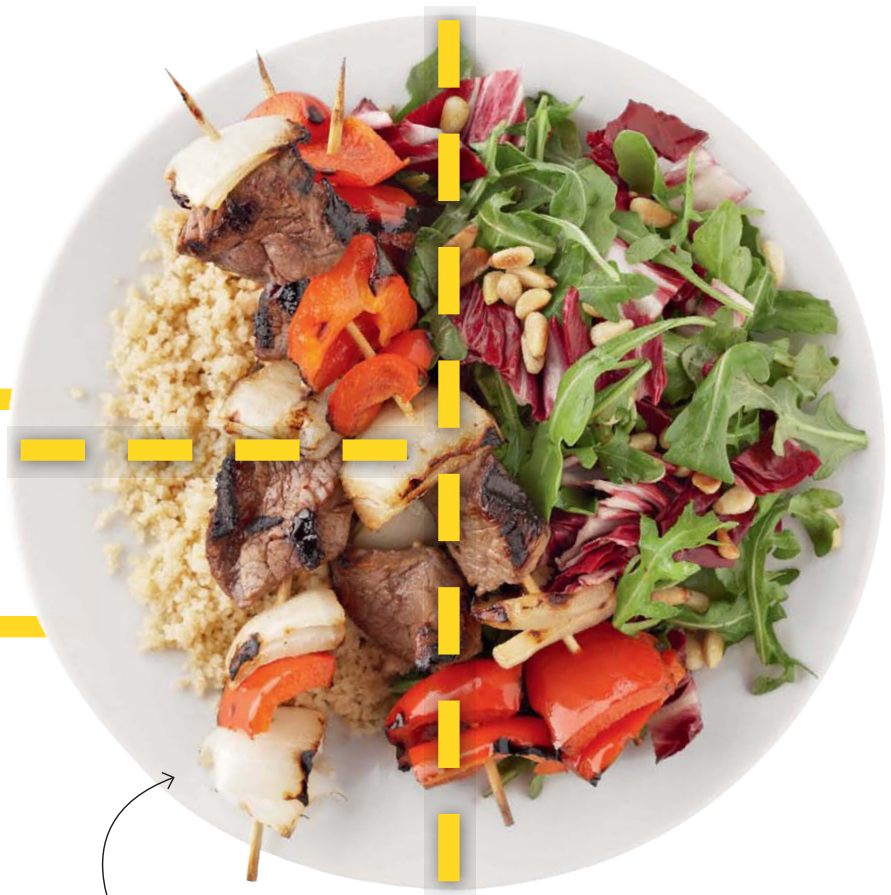
Naturally occurring sugar in milk and fruit is part of a balanced diet. But during processing, sugar is often added to foods. Pick the processed foods with the lowest amount of added and total sugar. ➤



Beware of foods labelled "sugar-free", which can still have carbohydrate.

3 CONTROL PORTIONS

The plate method is a simple but effective way to enjoy all the foods you love while still managing portions.



Recalibrate your plate

Divide your plate into three sections as follows:

- **½ non-starchy vegetables:** Fill half your plate with raw or cooked vegetables such as broccoli, green beans, cauliflower, cucumber, capsicum, salad greens, asparagus, zucchini and tomatoes. You'll get plenty of nutrients without spiking your blood glucose levels.
- **¼ starch or grain:** Choose 1–2 carb exchanges (15g–30g of carbohydrate) such as bread, pasta, rice, tortilla, beans or starchy vegetables such as potatoes, corn or sweet potato. Pick whole grains and beans full of fibre to keep you feeling full and your blood glucose steady.
- **¼ protein:** Choose lean protein options. Try poultry, pork, lean beef, seafood, tofu, eggs, cheese and nuts. Aim to choose a portion the size of the palm of your hand.

“As kilojoule and carb counts permit, add a serving of low-fat milk or yoghurt and a side of fruit to your meal. Favour fresh or frozen fruit over canned to avoid added sugars.

MIX IT UP

Implement the plate method when cooking casseroles and soups. Just think of the ingredients separately. For example, chilli traditionally has meat, beans, tomatoes, onions and capsicum, covering all of the plate method ingredients, says Starck. For pasta bakes heavy in carbs, such as tuna and noodles, 1 cup is generally 30g of carb.

SIZE UP YOUR DISHES

Start with a 22-cm plate. “We eat what is put in front of us,” says Starck. “So if we use smaller plates and smaller portions, it can help us make better choices.”

“Go easy on salad dressings, sauces and spreads and choose low-fat versions.

PORTION CONTROL

As you ease into portion control, make sure you weigh and measure foods often. When you don't have measuring utensils with you, use your hand to estimate; while the measurements aren't exact, they're better than a guess.

- **Clenched fist = 1 cup**
- **Two fingers lengthwise = 30g**
- **Tip of thumb to first knuckle = 1 Tbsp**
- **Thumb = 2 Tbsp**



4 GET COOKIN'

Learning to cook healthily at home is a crucial step to living well with diabetes. Cooking your own meals allows you to better control ingredients and portions.

Boost flavour

Low-sodium doesn't have to mean low-taste. Fresh herbs, spices and citrus provide bold flavours, helping you feel satisfied. Adding the likes of garlic and onion is another way to incorporate flavour.

USE HEALTHY FATS

Not all fat is bad. You can make smarter choices by swapping out saturated fats such as butter with better-for-you unsaturated fats such as canola oil and olive oil. But all fats are high in kilojoules, so use them in moderation.

TRY HOMEMADE

If it's packaged, chances are you can make your own version at home. For example, instead of buying fruit-flavoured yoghurt, buy plain low-fat yoghurt and add your favourite fruit, Starck says. And to reduce sodium, Starck also recommends mixing up your own taco seasoning.

PLAN AHEAD

It's hard to cook a meal after a busy workday. Planning your meals in advance is crucial to staying on track, Starck says. For each meal, determine your starch, protein and nonstarchy veggie choices. **Time-savers:** Think about cooking casseroles and meats in bulk and freezing them for later. Try placing ingredients in a slow cooker in the morning so dinner is ready when you come home.

“People who cook at home consume about **800 kilojoules less per day** than those who don't.

— Johns Hopkins Bloomberg School of Public Health

LIMIT SUGAR

It's natural to want to enjoy a sweet treat, but make sure you use sugar sensibly. Any form of it – whether white, brown, honey or syrup – adds kilojoules and carbs to your intake, with no nutritional value. Some

people with diabetes prefer to make use of sugar substitutes to help manage kilojoules and carbs while still being able to satisfy their sweet tooth and any cravings they may experience. ■





WEIGHT LOSS surgeries

More healthcare providers are recommending the use of medical intervention for weight loss. Read on and be ready for that conversation

▶▶ More than 60 per cent of Australian adults are overweight or obese. As this number continues to skyrocket, so does the number of people developing type 2 diabetes and other diseases related to excess weight.

Experts routinely advise overweight and obese people with type 2 diabetes to lose weight. Shedding a few kilos – or more – can improve your condition significantly.

But increasingly, some experts recommend weight-loss surgeries – called metabolic and bariatric surgeries in medical parlance – to achieve weight loss and glucose control if other strategies aren't working. This field is evolving fast.

But it's no quick fix. Let's talk through the options, and the risks and benefits, to consider for each type of procedure.

Surgeries and procedures

According to the American Society for Metabolic and Bariatric Surgery (ASMBS) – similar results have been seen in other global studies – surgery can improve type 2 diabetes in 90 per cent of patients and cause remission of type 2 in 78 per cent of them. (Remission occurs when a person can maintain normal

blood glucose levels without taking medications.)

In fact, weight-loss surgery is now considered a standard treatment option for people with type 2 diabetes, based on a statement of 45 professional organisations from around the world, including the American Diabetes Association (ADA), the International Diabetes Federation, and Diabetes UK. In June 2016, the ADA's journal, *Diabetes Care*, published the first clinical guidelines for weight-loss surgery as a treatment for people with type 2 diabetes.

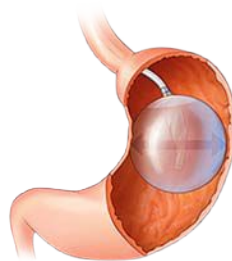
Definitions for the most common bariatric and metabolic surgeries and procedures follow.

● **Intragastric balloon**, has been used for over 20 years and inserts an uninflated silicone balloon into the stomach, which is filled with saline to limit how much you eat, and also delays gastric emptying. The balloon is not as invasive as some, but is a temporary measure that can come with some early side-effects (24-36 hours) of nausea and vomiting. "Gastric balloon intervention should be seen as a set of training wheels to support significant weight loss while changing lifestyle," says Dr Adrian Sartoretto of Sydney's Bariatric and Metabolic Institute and BMI Clinic. "As with any weight loss, longer-term lifestyle changes are required to maintain the loss."

● **Endoscopic sleeve gastroplasty (ESG)** is a relatively new procedure, which is performed endoscopically (through the mouth) without the need for surgery. Similar to the sleeve gastrectomy (but without removing the stomach permanently), the stomach's volume is reduced, limiting the

COMMON SURGERIES & PROCEDURES, ILLUSTRATED

Bariatric and metabolic surgeries and procedures alter your digestive system to limit the amount of food you take in, which helps you lose weight and can change your metabolism. Some make the stomach smaller, others change the small intestine. Talk to your doctor about what's safe for you.



Intragastric balloon



Endoscopic sleeve gastroplasty



Gastric (lap) band



Laparoscopic sleeve gastrectomy



Roux-en-Y gastric bypass

food intake. As the procedure is less invasive than surgical options it is considered to be a safer option. "Our patients choose the ESG due to the safety and efficacy profile, and also the minimal down-time required," says Dr Sartoretto.

● **Gastric (lap) band** surgery involves putting a band around the upper part of the stomach. This simpler surgical procedure tends to be less effective for weight loss and diabetes remission than gastric bypass.

● **Laparoscopic sleeve**

gastrectomy, involves the stomach being stapled in two sections, with the larger amount being permanently removed. The procedure is less complicated and has fewer complications than the gastric bypass, but it may not be as effective at inducing remission of diabetes, says ASMBS former president Raul Rosenthal.

● **Roux-en-Y gastric bypass** procedure restructures the pathway for food through your body so it will bypass most of the stomach and the upper part of the small intestine. ➤

Considerations

Bariatric and metabolic surgeries have become more common, given their success rates in helping people lose weight and improve their diabetes. For some morbidly obese people with diabetes, surgery is the best option. But research is beginning to show it could also help people with prediabetes or type 2 diabetes in less dire circumstances.

In fact, these procedures and surgeries may be offered to more people in the future, says Suneil Koliwad, assistant professor at the Diabetes Center at the University of California.

Obese people are experiencing improvements in blood glucose control right after surgery (some even in the hospital, but many in the first week or two), long before they lose significant weight. This suggests that the surgery itself, not just the subsequent weight loss, can help people with their diabetes.

Some experts now suggest people with diabetes could still benefit from the surgery's effect on their blood sugar levels, even if they don't meet the obesity requirements currently recommended for surgery. So those requirements may change.

"It's not there yet, but it's on the horizon," Koliwad says.

At present, most insurers require people to have a BMI of 40, or a BMI of 35 plus obesity-related conditions such as type 2 diabetes, before they cover the surgery. Ask your insurer about specifics.

Donna Ryan, associate editor-in-chief of the journal *Obesity*, agrees that there will probably be more surgeries in the future for people with

Notes on the lingo

The former wording for weight-loss interventions was **'bariatric surgery and procedures'**.

Now, with the positive effects that medical professionals are seeing on obesity-related metabolism issues in

addition to these procedures' weight-loss benefits, the terminology has evolved to include 'metabolic'.

These days, you'll hear your healthcare team talking about **'metabolic and bariatric surgeries'**.

The new terminology isn't a blanket term. Procedures that are only restrictive (such as gastric band, which doesn't remove any part of the stomach or intestines, but only restricts them) don't seem to have much impact on metabolism-related conditions. These remain solely **'bariatric procedures'**.

diabetes. "There's a movement toward using BMI as a screener, and then identifying people with metabolic problems and using weight loss as a pathway to improvement," she says.

Despite a growing number of success stories, there's not yet a standardised method for reporting outcomes for bariatric and metabolic surgeries, which makes it challenging to track success on a long-term basis. So consult carefully with your health-care provider and

thoroughly discuss all the risks, as well as the benefits, before you schedule any type of surgery or procedure.

How to prepare for a procedure

Prior to surgery it is important to focus on the new lifestyle ahead of you. The best place to start is to change your diet. Although it may be tempting to binge eat one last time before your 'new body', the sooner you prepare your body for the change, the quicker you will be able to adapt after the surgery.

Also, experiment with protein powders to discover which flavours you enjoy – as well as low-calorie, protein-rich foods – as you will be on a meal replacement both pre- and post-procedure to allow your body to heal.

Ensure you have spoken to your surgeon about what the surgery entails to ease any anxiety, and talk to your support group – make sure your immediate friends and family understand what your needs will be in order to heal and pull through on the other side.

After the surgery, you will be rapidly losing weight, so ensure you have comfortable and loose clothes for your transition, and pack some of these in your hospital bag. Also, stop smoking prior to surgery.

It is important to recover and gain plenty of rest within the first few weeks. However, it is also important to avoid infection, and to get up and walk as much as you can, comfortably, to begin building up your strength.

Walking helps to prevent blood clots, but take it slowly!

PROCEDURES BY THE NUMBERS

The Australian Bureau of Statistics (ABS) reported nearly 63.4 per cent of Australian adults (11.2 million people) were classified as overweight or obese in 2014-15, compared with only 54 per cent of the nation (7.4 million people) in 2005.

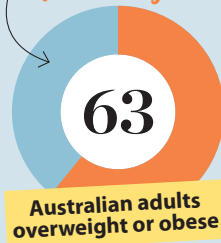
Of those aged 18 years and older, more than two-thirds (70.8 per cent) of the male population was classified as overweight or obese, and more than half (56.3 per cent) of the female population. In children aged 5-17, the ABS identified that one in four were overweight or obese.

According to the Australian Government Medicare Item Reports (Nov 2016 – Oct 2017), more than 22,700 weight-loss surgery operations were performed privately in Australia, up from 9300 in 2005-06. All of these surgeries involved a primary procedure, with the most common being the laparoscopic sleeve gastrectomy – accounting for 18,106 of all procedures (79 per cent).

Of all the procedures, 79 per cent of patients were female, with the most common age group being 35-44, and 45-54 in males.

The AIHW further reported almost 20,000 patients underwent surgery in private hospitals in 2014-15, while the remaining 2700 went to public hospitals. The median waiting time for elective weight-loss procedures across Australia was 73 days, varying from 13 days in Queensland to 1803 in Tasmania. For those who underwent weight-loss surgery as their primary procedure, the nation's median waiting time increased to 81 days.

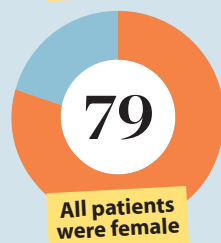
Breakdown by percentage



Australian adults overweight or obese



Laparoscopic sleeve gastrectomy



All patients were female



Surgeries conducted in private hospitals

The bottom line

Over 26,600 weight loss surgery-related procedures were billed to Medicare (Nov 2016 – Oct 2017), with sleeve gastrectomy accounting for 79 per cent of all procedures billed. However, Medicare doesn't cover everything.

While private health insurance on a premium level helps with a fraction of the cost – less than half of the Australian population has private health insurance – you should still expect out-of-pocket expenses. Under private insurance, these expenses come to about \$5000 for a gastric sleeve.

Follow your surgeon's instructions on how long you need to stay on a liquid diet, and when you can transfer to pureed foods and further soft foods.

With some procedures, it can take more than a month before you can begin eating soft foods and resuming normal activities. Before you start any physical activity or a new exercise program, consult your surgeon or clinic.

PLEASE REMEMBER...

* If you are considering a weight loss surgery or procedure, they are not an easy option. They all come with both short- and long-term risks, and require effort. In some cases patients may regain weight if lifestyle changes are not implemented long term. ■



self care



Leaping FORWARD

How to jump over the barriers that may be holding you back from the best self care

▶▶ Caring for your diabetes can seem like a hurdle that's hard to jump. But the tasks themselves might not be the real problem. Specific barriers could be coming between you and optimal self care. Lack of food choices or minimal time to work out can make diabetes care seem difficult. Treatable conditions such as depression or anxiety can really hold back your efforts.

Beverly Adler, a clinical psychologist, suggests examining your diabetes care to pinpoint your barriers.

Changing attitude

Attitude plays a major role. Taking a positive approach improves your ability to take proactive steps, says Jennifer Markee, a social worker and diabetes educator with Endocrinology Associates of Memphis. "A lot of times patients tell me, 'Well, I screwed up,' because they aren't meeting their goals. It's self-defeating," Markee says. "When the outcome isn't what you want, a snowball effect occurs and that attitude can affect your diabetes care."

This sense of defeat can lead to hopelessness and the idea you are destined to get complications from diabetes – which may prevent your best self care.

Recognising your feelings is important – they can be barriers, too. Lin Campbell, who specialises in the psychological and behavioural aspects of diabetes care, suggests putting your feelings in print.

“Sometimes getting the information out of your brain ... allows you to process your feelings better,” she says.

Writing down your feelings makes them more justified and easier to acknowledge. Read your words out loud to yourself or talk them over with a friend. A person who offers a trusted place to hash out what’s standing in your way can help you brainstorm solutions for your barrier.

Untangling emotions

Detaching the everyday struggles of diabetes from your emotions can help you avoid feeling bogged down when results are not what you want. Scott Johnson, PWD type 1, says taking a step back and looking at his diabetes care has helped him develop solutions.

“Our emotions get so wrapped into our lives with diabetes that it takes a real conscious effort to take a step back and look at your behaviour and the results of your behaviour separately from the emotions you are feeling,” he says. “It’s something that takes practice and a lot of hard work.”

Looking at your diabetes care from a different angle can help you discover new ways of tackling your barrier. “A lot of times just taking a deep breath and asking yourself, ‘What can I do?’ will open up more options and ways to break the pattern you’re in,”

Step by step

Create new behaviours one step at a time – and celebrate each victory.

✦ Know that behaviour changes aren’t easy, but with education, a solid attitude and specific goals they are achievable, says educator Jennifer Markee.

✦ Take it one day at a time, says clinical psychologist Beverly Adler. “It’s much easier and more manageable to think it’s just one finger prick at a time,” she says.

✦ Choose small, well-defined steps. “I feel like I am in a process of not trying to address one huge barrier, but a bunch of little ones,” says Bob Pedersen, PWD type 2. Becoming his own chef was one step Bob took to change his tendency to dine out on his way home. “I’m sort of competing with the local restaurants, and I’m winning,” he says.



I can’t guilt and shame myself into the behaviour change. I need to look at it from the aspect of really wanting to be a healthy person living with diabetes.

—Scott Johnson, PWD type 1

Campbell says. Doing so opens new avenues for you to start demolishing barriers.

Understanding your barrier

Problem-solving involves getting down to the nitty-gritty of what is causing a barrier to stand in your way. “Using that skill of problem-solving through blood sugars, counting carbs, remembering to take meds and making time to work out, and

collecting as much data as you can, helps you make an educated decision,” Markee says.

One example: “A while back I realised on workdays I would find myself standing in front of the vending machine around 3pm, wanting to buy a candy bar,” says Bob Pedersen, PWD type 2, who knows weight control and glucose levels are important.

“I told myself, OK, let’s treat it not as a psychological problem, but as a puzzle that might lead to a solution.” Bob’s blood glucose checks showed his levels tended to dip at that time of day – not into hypoglycaemia, but enough to warrant a snack. Bob now eats a fibre-rich bar mid-afternoon, which may help prevent overeating later.

Using data to find out what affects your end results allows you to focus on long-term outcomes and find solutions that work for you. The numbers might be frustrating, but having more information helps you make better decisions, Markee says. “Once you have the data, you can choose what to do to make sure you stay on track,” she says. ■

TESTING,

TESTING, 1, 2, 3

These blood glucose monitoring tips can help people living with type 2 get better results – and stop diabetes from becoming a pain in the wallet, too!

1 What's the point of monitoring?

Your blood glucose levels are constantly changing and are affected by many factors, including the foods you're eating, the meds you're taking, your activity levels, whether you're feeling stressed, your hormones, and even how well you're sleeping. Everyone is different, which is why it's vital to learn more about how your lifestyle affects your BGLs through consistent monitoring.

2 Just a little prick



New to monitoring or just want a refresher course?

Follow these steps to get the most accurate results:

- Remove a test strip from the vial or foil packet and insert into the meter, which will turn on and give you a message when it is ready for your drop of blood.
- Obtain a drop of blood and apply it to the test strip. Be sure to first wash and dry your hands well.
- Within 5-10 seconds, the meter will tell you your reading. You can record this in a paper diary or record book; in addition, most meters keep a history of your readings with the time and date.
- Used strips can be placed in the rubbish bin, but lancets should be disposed of in a sharps container.

3 How often should I test?

When and how often you monitor will depend on how your diabetes is being managed (e.g. with insulin, tablets, or diet and exercise). In general, however, the best times to monitor when you have type 2, are:

1. **Before meals.**
2. **Two hours after meals (from the start of your meal).**
3. **If you are at risk of hypos, then occasionally overnight (2-3am).**



4

Clean up your act

Anything on your fingers can affect your readings and give you a false high. The solution? Clean your hands with water, or with hand sanitiser or wipes if you're out and about. If none of these options are available, wipe off the first drop of blood, and test with the second for a more accurate reading.

5 Save strips, save dollars

Fact – if you bend a test strip it won't work, and will need to be thrown away. Cut down on wastage by making sure that the strips are inserted the right way up, and that they're pushed all the way into the meter.

6 Let the sunshine out

Want to make your strips last longer? Humidity and direct sunlight can cause test strips to become unusable, so keep them in an airtight container and store them in a cool, dry place.

7 Ban the burn

Feeling the burn when you're testing? Here's how to give pain the flick:

1. Ensure your hands are clean, dry and warm to help with getting a good drop of blood.
2. Use the side of your fingertip rather than the top, which you are likely to use in everyday activities.
3. Choose the right depth setting – the shallowest setting that gives you enough blood.

8 In sickness and in health...

It's also a good idea to test more regularly when you:

1. Are unwell.
2. Are under a lot of stress.
3. Are experiencing symptoms of high or low BGLs.
4. Are making changes to your diabetes management plan (e.g. modifying your diet, activity levels or medication).
5. Have a change in routine (i.e. when you are travelling or on holidays).
6. Are driving long distances and you are on medication that can cause hypoglycaemia.



9 Make a date (and keep it)

Out-of-date test strips can affect your readings, so keep an eye on the expiry dates and aim to use your oldest strips first. ■





Diabetes *and* PCOS

Wondering what PCOS is and why we're talking about it in a magazine for people with diabetes? *DL* dietitian and diabetes educator **Dr Kate Marsh** explains

► **It affects about 15 per cent of Australian women of reproductive age**

and was once considered a fertility issue, but we now know there is more to polycystic ovary syndrome (PCOS) than just difficulty falling pregnant.

Symptoms usually start during puberty, or in the early to mid-twenties, but they can occur at any age, and PCOS is the most common endocrine (hormonal) disorder in women. It is estimated that between 12 and 18 per cent of Australian women of reproductive age are affected, and up to 21 per cent in high-risk groups such as Indigenous women.

So why is there more to PCOS than just fertility issues?

The majority of women with PCOS have insulin resistance underlying their condition – the same problem that occurs in type 2 diabetes. This means women with PCOS are at much higher risk of developing type 2 diabetes. In fact, a 2010 review found that after taking weight into account, women with PCOS had a four-fold increased risk of type 2 diabetes and a 2.5-fold risk of pre-diabetes compared with women without the condition.

A more recent study found that women with PCOS were almost nine times more likely ►

living well

to develop type 2, and twice as likely to develop gestational diabetes, as women without.

This relationship also means that many women with type 2 diabetes may have PCOS. And if you're a male with type 2, this is still important as your sisters, daughters and granddaughters could have PCOS or be at risk of developing it.

What causes PCOS?

Exactly why PCOS develops remains unknown, but we do know that there is a genetic component – and a few different causes. But, as discussed earlier, for most women, PCOS is linked with insulin resistance.

Insulin resistance is an insensitivity of the body to insulin. When you have insulin resistance, your insulin doesn't work effectively, so the body needs to produce increasing amounts of insulin to keep the blood glucose levels under control. In women, high levels of insulin can cause the ovaries to produce more male hormones, which disrupts the normal ovulation cycle and causes many PCOS symptoms.

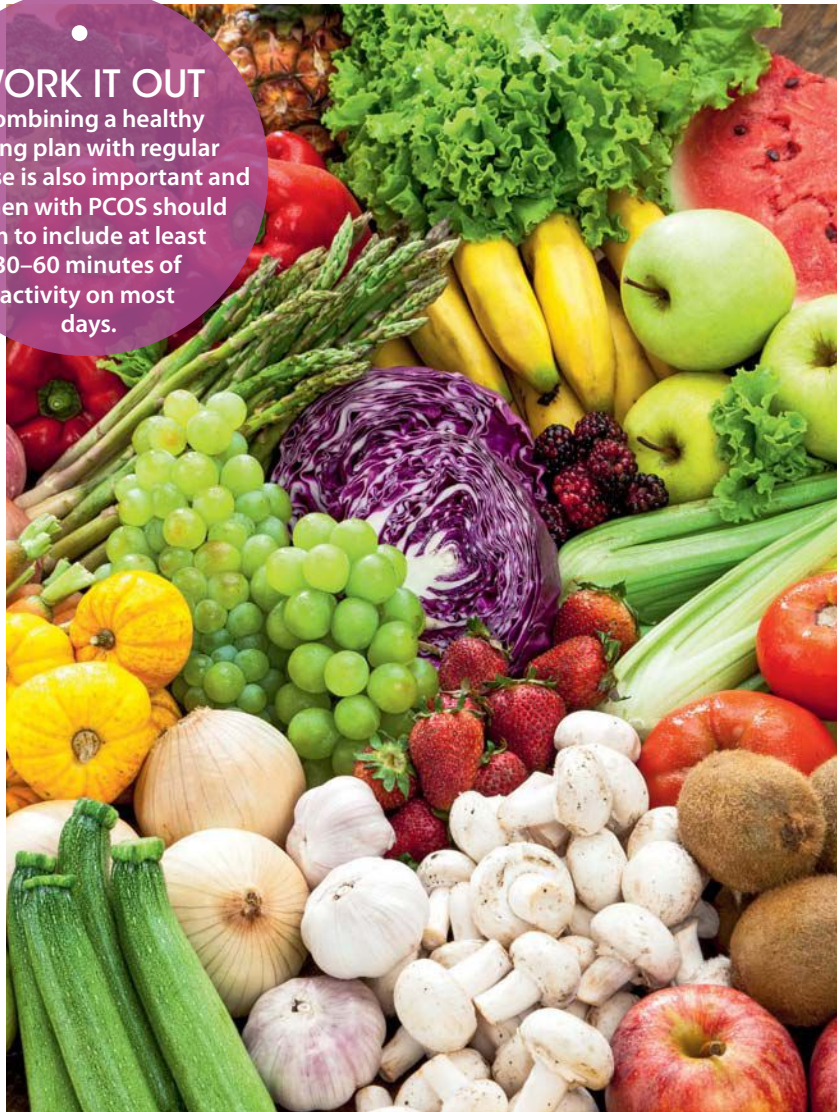
The good news is that by improving insulin resistance, many symptoms are resolved, or at least improved, and long-term health risks, including the risk of diabetes, can be reduced.

What can I do if I have PCOS?

Management of PCOS has traditionally focused on treating individual symptoms such as acne, infertility, excess hair or irregular periods. It's now known, however, that lifestyle changes focused on

WORK IT OUT

Combining a healthy eating plan with regular exercise is also important and women with PCOS should aim to include at least 30–60 minutes of activity on most days.



improving insulin resistance can significantly improve all, or most, of the symptoms associated with PCOS.

In fact, programs combining diet, exercise and modest weight reduction (about 5-10 per cent of weight) have been shown to improve symptoms and restore ovulation in women with PCOS, as well as reducing metabolic risk factors (such as blood glucose and insulin levels, and blood fats).

Women who are overweight should aim for modest weight loss, and all women with PCOS should make efforts to prevent

weight gain, as carrying extra kilos worsens insulin resistance and the symptoms of PCOS.

While more research is needed into the optimal diet for women with PCOS, it's currently recommended that they follow general healthy eating recommendations, similar to those with type 2 diabetes. Combining a healthy eating plan with regular exercise is also important and women with PCOS should aim to include at least 30-60 minutes of activity on most days.

Medication may also be needed, but is only effective in



How do I know if I have PCOS?

Symptoms of PCOS may include:

- **irregular or absent menstrual periods**
- **infertility or reduced fertility**
- **acne**
- **excess hair growth on the face, chest and abdomen**
- **scalp hair loss**
- **overweight and difficulty losing weight**
- **higher incidence of miscarriage**

There's no single test used to diagnose PCOS. Diagnosis will usually be made by considering a woman's symptoms, testing hormone levels, and performing an ultrasound to look for cysts and enlargement of the ovaries.

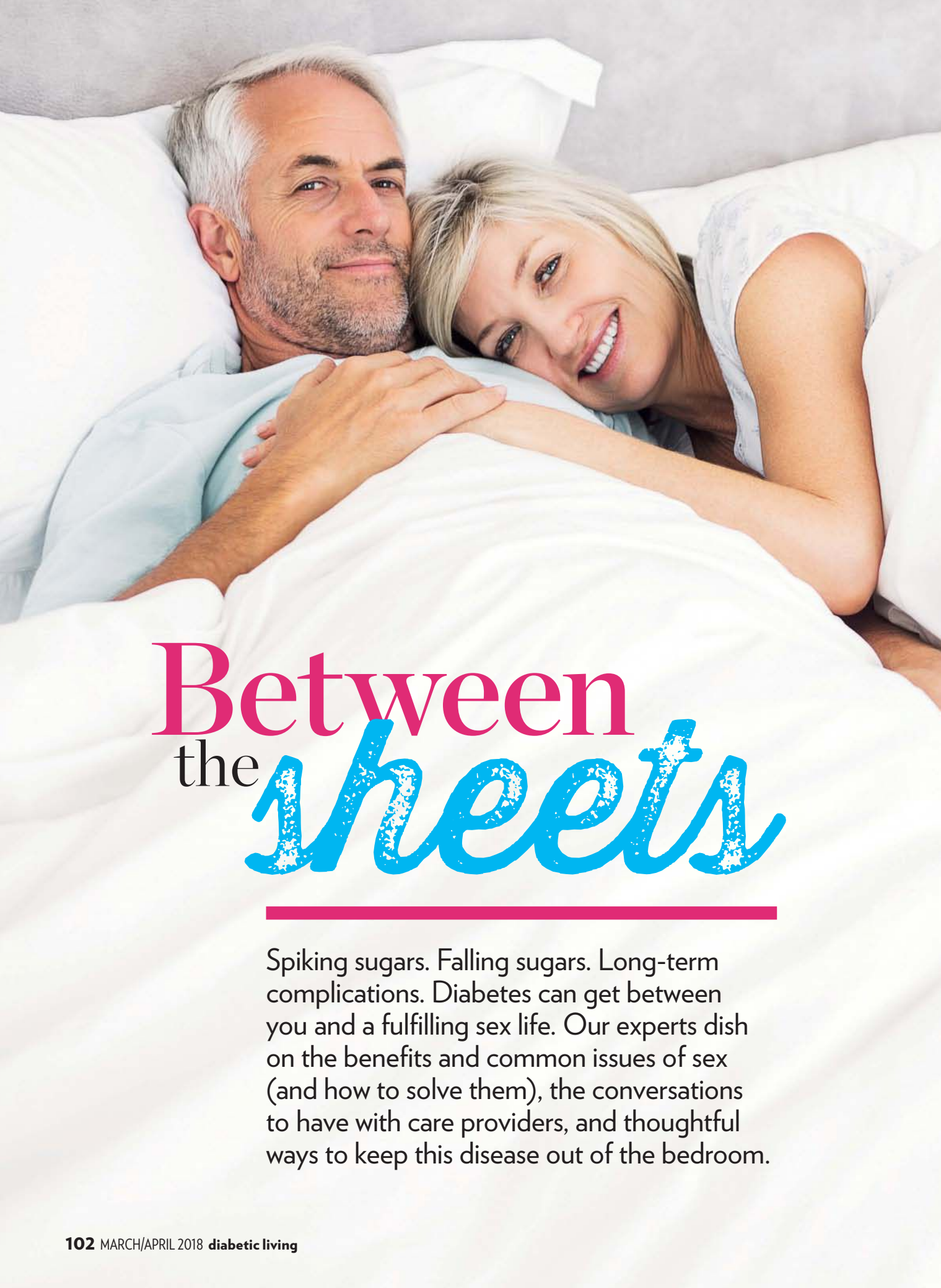
tandem with lifestyle changes. Metformin, commonly used by people with type 2 diabetes, is now often used by women with PCOS and has been shown to have numerous benefits. The oral contraceptive pill, fertility drugs, and other diabetes medications may also be used, depending on treatment goals.

If you haven't been diagnosed with PCOS but suspect you have it, start by seeing your GP for further investigation. They may refer you to an endocrinologist, reproductive endocrinologist or a gynaecologist. If you have PCOS and need help with your diet, an Accredited Practising Dietitian (APD) can help to develop a personal eating plan.

Seek help today to work on improving your symptoms as well as reducing potential long-term health risks. *To find an APD, visit daa.asn.au.* ■

“

Combining a healthy eating plan with regular exercise is also important

A photograph of a middle-aged couple lying in bed. The man, on the left, has grey hair and a beard, and is wearing a light blue shirt. The woman, on the right, has blonde hair and is wearing a white top. They are both smiling and looking towards the camera. The woman's hands are resting on the man's chest. They are covered by a white blanket. The background is a plain, light-colored wall.

Between the *sheets*

Spiking sugars. Falling sugars. Long-term complications. Diabetes can get between you and a fulfilling sex life. Our experts dish on the benefits and common issues of sex (and how to solve them), the conversations to have with care providers, and thoughtful ways to keep this disease out of the bedroom.

Three steps to better sex

▶▶ As a person with diabetes, you have every reason to expect a terrific sex life. But diabetes can be an occasional nuisance or even a constant bogeyman in the bedroom.

"It may be a day of roller-coaster glucose readings that steals your extra energy, or you're just feeling awkward about wearing an insulin delivery or glucose monitoring device," says Janis Roszler, co-author of *Sex and Diabetes: For Him and For Her* (American Diabetes Association, 2007). "It could just be a day when burnout is getting the best of you."

But you can minimise the challenges and maximise sexual pleasure, whatever baggage you bring to the boudoir.

1 Communicate openly about what you're feeling. Take your attention off the glucose levels for a while; you might consider wearing CGM. It helps with spontaneity.

2 "Apply a sense of humour," is Roszler's suggestion. "It helps you both laugh off the challenging moments."

Long-term, years of glucose swings along with risk factors such as excess weight, cigarette smoking, and uncontrolled blood pressure and lipids can take their toll, including on sex organs.

Circulatory and nervous systems play lead roles here. A form of diabetic nerve disease called autonomic neuropathy damages nerves that manage automatic functions, from controlling blood pressure to digesting food and, yes, the behaviour of your sex organs. Then there's blood flow. If it's hampered, you might not receive enough blood below the belt to get aroused.

3 Glucose control and healthy lifestyle choices can greatly reduce these issues. Good sex offers a bevy of benefits, from the physical to emotional, so it's worth the effort, says Dr Arnon Krongrad. "Sex is a key ingredient for a happy life that allows us a deeply meaningful level of trust and belonging." ➤

Let's talk about sex

● Find a health care provider (HCP) you're comfortable with who gives you real-life advice.

● Don't be shy. You aren't the first person with your issue, and you won't be the last. If it helps, write your concerns on paper.

● What's a good sex life to you? Share your goals with your HCP and ask for input.

● Don't give up – persist. If one treatment doesn't work, then ask for the next option.

● Time-crunched providers may neglect to ask about sexual function. Know that your doctor is interested in your sex life. Share your signs and symptoms; be clear and to the point.

relationships

BEYOND THE BOUDOIR

These are the most common issues, tests and treatments for sexual issues in PWD.

WOMEN

Potential problems:

Female sexual dysfunction includes loss of sexual interest or desire, difficulties with arousal, lack of lubrication, painful intercourse, and inability to reach orgasm. Diabetes, nerve and circulation problems, ageing, menopause, frequent yeast infections and depression all increase the likelihood of dysfunction.

Checks and tests:

Candidly share with your provider gynaecological and sexual history (past and current partners) and diabetes control. Mention all meds. And be honest about alcohol, drugs and tobacco use. Though it can

be tough, be straightforward and open. Your provider will do a pelvic exam to check for physical changes.

Today's treatments:

"Providers typically start with the least expensive and easiest strategies with a proven track record," Roszler says. These include moderate weight loss (if needed), physical activity, healthy eating, minimal alcohol use, stress reduction and better glucose control.

Create an open line of communication with your partner. Your doctor may recommend a mental health provider or sex therapist to help, as well as vaginal lubricants to aid dryness or pain.

If these don't help, you may explore other options: localised vaginal estrogen in a ring, cream or tablet, or other hormone treatments.

MEN

Potential problems:

The major male sexual problem is erectile dysfunction (ED): the inability to achieve and maintain an erection. At least half of men who have lived with diabetes for 10 years or more experience ED.

This may start before other complications, or it may be the initial symptom of diabetes.

"A related problem is andropause, the age-dependent decrease of the male hormone testosterone, which experts increasingly associate with loss of erectile function," says Krongrad.

Low T, as it's called, is also referred to as 'male menopause'.

Checks and tests:

To diagnose ED, your provider will go through similar personal, sexual and medical histories as for women. Be straightforward and open. Next up, they may suggest blood work to measure

Don't worry.
It's common
75 per cent of men and
25 per cent of women
with diabetes
experience sexual
problems.

testosterone, thyroid and other hormones, as well as other tests.

Today's treatments:

Start with the same lifestyle habits and actions for diabetes control that are recommended for women. Your health care provider may also try medication to help improve blood flow in the penis to achieve better erections.

Common TGA-approved meds are Viagra (sildenafil), Levitra (vardenafil), Stendra (avanafil) and Cialis (tadalafil). But men with significant heart disease and circulatory issues get a red flag. "Significant can be defined as enough to trigger a heart attack or stroke," says Krongrad.

Sex isn't typically a cause of heart attack or stroke, but ED can signal heart or circulatory problems, so tell your doctor.

Other treatments for ED include penile injection therapy, surgical implant of a penile

prosthesis, or a vacuum device. Include your partner in the talks and come to a decision together.

Hormones and blood sugar:

Just as diabetes affects sex, a woman's periods may affect her management.

"Hormone changes can affect glucose control," says Aimee Gallagher, scientific program manager for the Society for Women's Health Research.

Note glucose level changes over each cycle. Perimenopause and menopause can also create new glucose patterns – for example, an early sign of menopause for women on insulin is low blood sugar caused by dropping progesterone levels.

"Stay active, practise good sleep habits, and check glucose often to make sure that menopause symptoms are not high or low glucose," Gallagher says. "They can mimic each other. ■

THE BENEFITS OF SEX

- Increase physical fitness and burn calories
- Decrease stress
- Boost self-esteem
- Improve quality of sleep
- Enhance communication and partner intimacy





ESTÉE LAUDER COMPANIES
BREAST CANCER CAMPAIGN

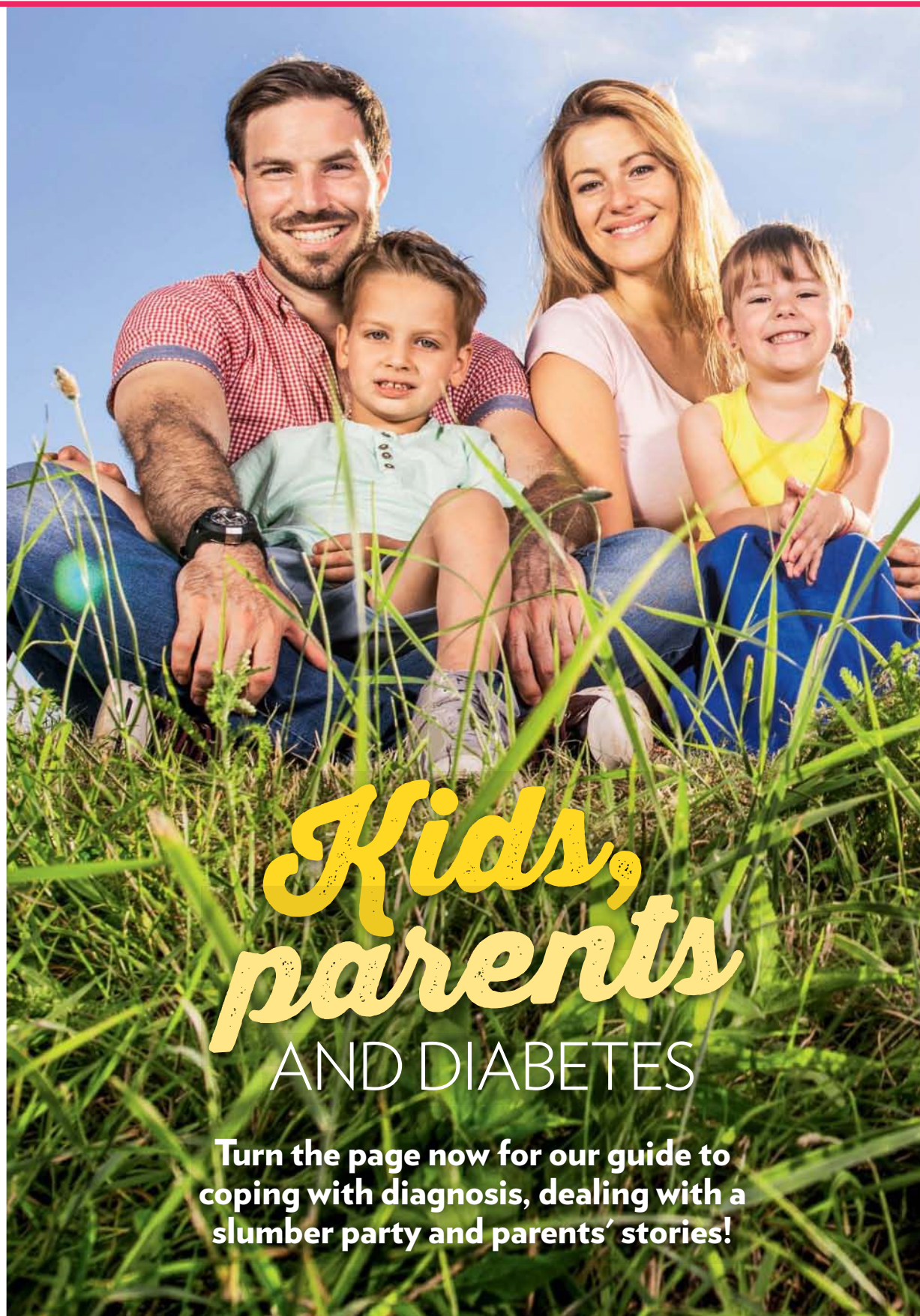
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Kids, parents AND DIABETES

**Turn the page now for our guide to
coping with diagnosis, dealing with a
slumber party and parents' stories!**

YOU CAN DO IT!

*Tips for parents of
newly-diagnosed
type 1s*



Learning your child has type 1 diabetes can be an emotional and overwhelming experience for parents. Here are tips from *Marina Chaparro*, a mum with type 1 diabetes who is also a certified diabetes educator

TYPE 1

▶▶ If you're the parent of a child with type 1 diabetes, you will never forget the date and exact moment you first learn about the diagnosis.

Life changes forever on that day. The first weeks and months can be overwhelming and filled with emotion. It takes time to adjust to this new lifestyle.

As a parent, it can be very challenging to assimilate. But know this: diabetes is not your fault, and there is nothing you could have done to prevent it. The exact causes of type 1 diabetes are still unknown and extensive research is under way to one day find a cure.

I speak from personal and professional experience. I was diagnosed with type 1 at age 16 and grew up to become a certified diabetes educator specialising in children and adolescents. This means I can share an important lesson: type 1 diabetes is not a disability, it is a chronic condition in which the pancreas simply stopped working.

How you choose to view this condition will eventually shape how your child sees it. That is why parents are such an integral component of a child's diagnosis. A parent's responsibility is to provide the tools needed for appropriate long-term diabetes management.

If you choose to view your child's diabetes as a medical condition that can be managed, rather than some sort of a disability, your child will be able to do anything they want in life.

Eventually, when it's your child's turn to fly solo, they will do it with confidence and ease. Teaching a child how to manage their diabetes independently – without burdening them with too much responsibility – is the tricky part. There is no single way of caring for a child with diabetes. Diabetes management is very individual; what works for your child may not work for another. Here are my top survival tips for parents with newly diagnosed children with type 1 diabetes. ➤

Forget the word 'diet'

There is no such thing as a 'diabetic diet'. You might be inclined to buy items at the supermarket that are labeled 'diabetic friendly' or 'sugar-free', but the reality is your child with diabetes doesn't need 'diabetic foods'. The primary nutritional goal for children with diabetes is to balance carbohydrates with the right amount of insulin. Children should have wholesome nutrition that includes plenty of fruit, whole grains, vegies and protein.



COUNT YOUR CARBS

Carbohydrates are found in foods such as bread, cereals, fruit, milk and sugar. They are important because they raise blood glucose levels. This does not mean your child should eliminate carbohydrates or go on a low-carb diet. Instead, you should know which foods contain carbohydrates and learn how to count carbs by reading the nutrition label, using a food scale or learning carbohydrate amounts in common foods. Remember, children need carbohydrates to grow and develop properly.

FIND SUPPORT.

Even if no one else in your immediate family or neighbourhood has diabetes, you are far from alone. According to Diabetes Australia, 130,000 Australians have type 1 diabetes and almost 200 people a week are diagnosed with type 1. The online diabetes community is a powerful social support where you can find other caregivers going through the same experiences as you. Communities such as Children with Diabetes, Beyond Type 1 and JDRF provide reliable resources and education that are redefining what it means to live with type 1 diabetes.



Snack wisely

Before being diagnosed with diabetes, snack time might have been your child's favourite time of day. Now, snacks will need to be planned to fit your child's schedule, activity and blood sugar readings. Two to three snacks a day, with a set number of carbohydrates, may be needed to ensure proper nutrition and stable blood sugar.

Advocate for your child at school

Diabetes management does not take a break, which means your child needs appropriate medical care at school. It's important to

ensure both you and your child feel comfortable going to school and managing diabetes. Schools are responsible for providing a safe environment for students to thrive. Children with diabetes need to be allowed to check blood sugar as needed, inject insulin when necessary, and treat low blood sugar.

Schools are often unaware of the complexity involved in the care of a child with diabetes. The NDSS and Diabetes Australia have published 'Mastering Diabetes in Preschools and Schools', which you can download for your child's teachers to ensure they have the best care possible.

Meet with a registered dietitian and Certified Diabetes Educator

One of the most challenging aspects of managing diabetes is food. Your children can no longer 'just eat' like other kids. Instead, children and parents must become part dietitian and part mathematician to balance food and insulin. A nutrition and diabetes expert can teach counting carbohydrates by reading nutrition labels, and using a food scale and measuring cups. And a diabetes educator can assess how many carbs are appropriate for your child's age, weight and activity.

CARRY FAST-ACTING GLUCOSE.

Make sure you always have a source of fast-acting carbohydrates in case of low blood sugar. Glucose tablets, juice boxes, gummy bears or sugar packs are good options because they are easy to carry. Avoid candy bars or foods that contain high fat or protein as they take time to raise BGLs. Hypoglycaemia can happen unexpectedly, so it's best to plan.





NEVER STOP CHECK, CHECK, CHECKING BLOOD SUGAR

Monitoring BGLs will give you a better understanding of how your child is adjusting to the medications, food and activity. Check blood sugar before and after meals and snacks, before exercise and bedtime. You can also consider a continuous blood glucose monitor (CGM), a tiny sensor inserted under the skin that measures real-time glucose levels without having to prick fingers constantly. Such wearable technology has given people more freedom and information to manage their diabetes better, burden-free.



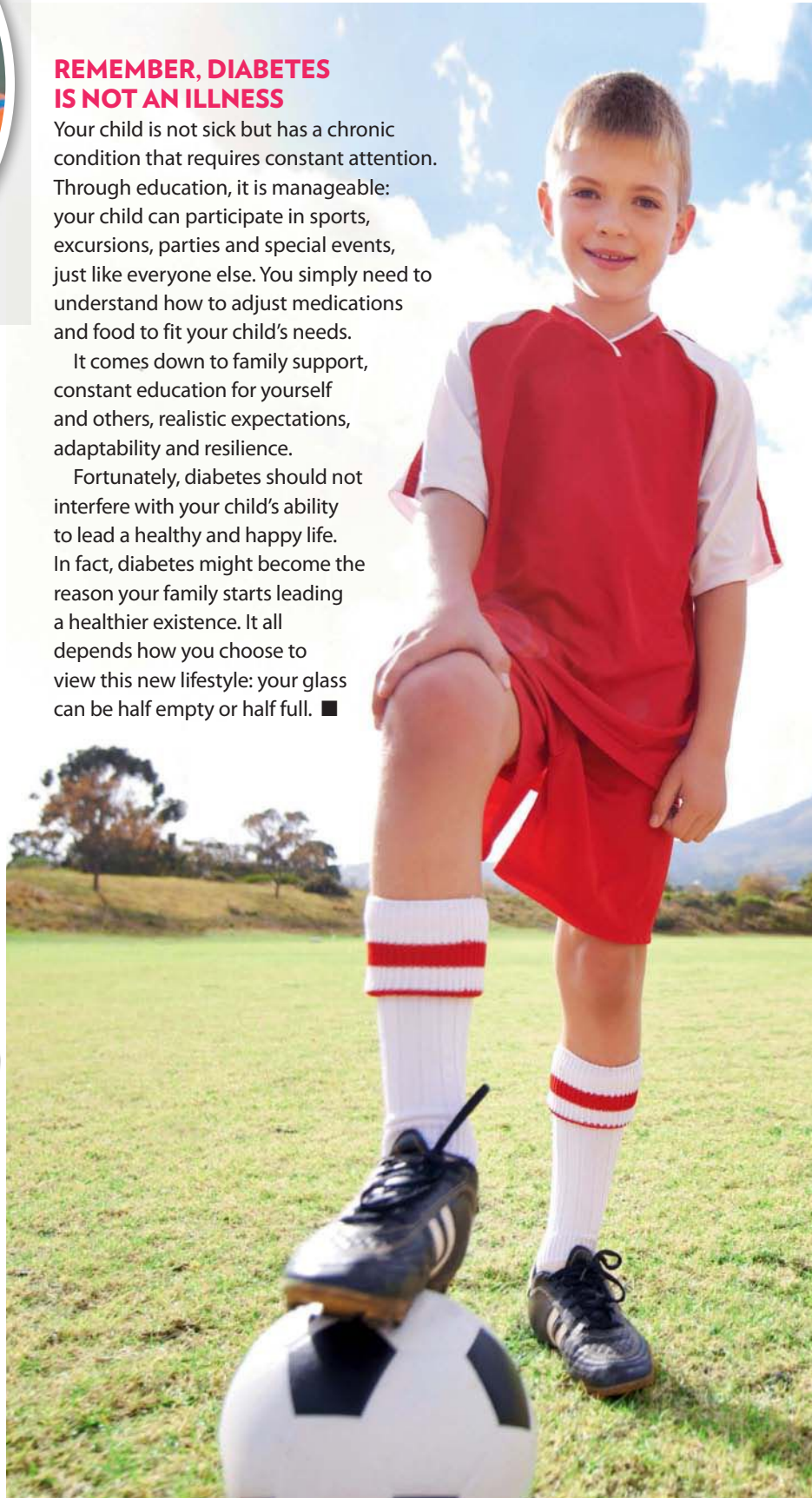
Your child should always carry with them a medical alert identification. It can be a bracelet, necklace or something placed in your child's backpack. In an emergency an ID can notify medical personnel what to do. It's nearly impossible to predict when an emergency such as a low or high BGL can occur.

REMEMBER, DIABETES IS NOT AN ILLNESS

Your child is not sick but has a chronic condition that requires constant attention. Through education, it is manageable: your child can participate in sports, excursions, parties and special events, just like everyone else. You simply need to understand how to adjust medications and food to fit your child's needs.

It comes down to family support, constant education for yourself and others, realistic expectations, adaptability and resilience.

Fortunately, diabetes should not interfere with your child's ability to lead a healthy and happy life. In fact, diabetes might become the reason your family starts leading a healthier existence. It all depends how you choose to view this new lifestyle: your glass can be half empty or half full. ■



DIABETES AND *sleepovers*

Plan well to keep your child safe on a night away, writes *Ann Matturro Gault*

▶ Slumber parties are one of the most highly anticipated events of childhood. Apart from time-honoured traditions such as eating unhealthy food, being silly and watching a lot of bad TV, slumber parties give children a chance to create memories with friends in a way that isn't possible on play dates after school.

But when your child has type 1 diabetes, the idea of having them attend a slumber party can be nerve-racking. You can't help but worry about the myriad challenges that could arise, and how they'd be handled while your child is out of your care.

The good news... with some planning and prep, slumber parties can be a successful experience for you, your child and the host parent.

Dr Joyce Bookshester, a clinical psychologist with expertise in treating the emotional and developmental issues associated with type 1 diabetes, encourages this social experience, provided certain criteria are met.

"Having type 1 diabetes requires a specific care program that the host parents need to be comfortable addressing," she

says. "It's advisable to call the parents who are hosting and let them know your child has type 1 diabetes and ask them if they would be willing to meet with you.

"If the child's numbers are relatively stable, and the parents are convinced that their child is responsible and competent and skilled in the technology associated with type 1 management, don't hesitate. Kids don't want to be different and want to experience normal childhood events like sleepovers."

Before accepting an invitation, Bookshester recommends starting with a one-on-one sleepover rather than a slumber party. A family member or close friend who lives nearby is an ideal choice for the trial run. "The one-on-one sleepover is an excellent way for families to get their feet wet," she says.

Sleepover prep

If you and your child decide they're ready, consider the following tips from Bookshester to help make the sleepover party a success for everyone:

● **Reach out by phone**

to inform the host that your child has type 1 diabetes. The family may decide from this phone call that they're not comfortable with this responsibility, or you may determine they are not ready to take this on. Lisa Gibby, mother of a teenage son and daughter who both have type 1 diabetes, says, "We are always upfront about what type 1 diabetes involves. Most people don't realise how involved blood glucose management can be. Unless you know the host family very well, it may not be reasonable to expect them to take on the diabetes management piece, too."





● **If the family is on board,** set up a time to demonstrate how your child's insulin dispensing and monitoring devices work. It's much better if this takes place before the day of the party. You don't want to risk making your child nervous or embarrassed. And the host parents will also be busy greeting guests and saying farewell to the parents, which means important details could be overlooked.

Also, a host family may be understandably less enthusiastic about the invitation once they are versed in the care. "I like to give written instructions to the host family when we meet," says Gibby. "Everything usually goes well until you pull out the

glucagon kit. [Glucagon is given by injection to remedy severe low blood sugar.]

"That's when you see the panic set in. You know they are thinking: 'What have I signed up for?' On the other hand, that reaction shows they are listening. In a way, it's a good thing. You almost want to see the panic because you need them to understand how serious diabetes is, while at the same time you want to put them at ease."

● **Find out what carbs they are planning to serve** If your child doesn't have restrictions with their diet (typical for most type 1 kids), reassure the host that special food isn't necessary.

Explain that your child can eat whatever they like as long as they adjust their insulin doses to the carbohydrates they consume. If your child is more comfortable calculating their carbs, this can be tricky when labels aren't available. If they're comfortable "send them with a scale to help them calculate foods that don't have labels. Use this formula: Every 30 grams of bread products and dessert is approximately 15 grams of carbohydrates," says diabetes educator Amy Hess, a program coordinator for the Teen and Adolescent Diabetes Transition Program at the University of Chicago's Kovler Diabetes Centre. ➤

● **Have a trial run the weekend before** the slumber party. Your child should demonstrate the ability to monitor their blood glucose levels by checking their blood sugar. If your child uses a glucose monitor, they should also know how to use and calibrate it, and understand how to count carbs in order to dose correctly. “My biggest problem with sleepovers is the anxiety I have over not knowing the numbers and not being there to help,” says Gibby. “If it’s a full-blown slumber party with a group of kids, and crafts and activities, the host parents already have a lot on their hands.” Technology, however, is changing the way parents can monitor their child’s blood sugar from afar. If the child uses a CGM, a parent can access it via phone (they can have followers receiving information and alerts/alarms as well).



● **If your child requires shots,** prepare syringes at home in advance. Having pre-set syringes means they won’t miss out, when trying to measure out the insulin.

● **Pack those diabetes supplies in a bag** that doesn’t scream ‘medical supplies’. Some children don’t want to share their diagnosis with friends and may not want to call attention to supplies in a medically marked kit. Try packing a kid-friendly bag designed to carry a meter, supplies and a snack. To store insulin, an insulated bag with a kid-friendly design can go a long way towards making your child feel comfortable.

Or you can purchase a plain insulated bag and have your child decorate it personally.

● **Reassure a nervous child** that you are available at any time for an unplanned pick-up. Make sure your child and the host parents know that you can be contacted at any time during the event if there is a problem or if your child wants to come home.

● **Leave behind the set of written instructions** you reviewed in the first meeting. You might also email them to the host so they can easily locate them, and keep for future reference.

● **Anticipate and plan** Make the family aware of what low blood sugar looks like and the symptoms to watch out for (shakiness, confusion, slurred speech, etc). If blood sugar numbers aren’t looking good at bedtime, you may want to pick up your child rather than ask the host parents to check in the middle of the night. You can always bring them back in time for breakfast in the morning.

Have a plan B... just in case

At any point leading up to the sleepover, Gibby says, “If I detect wavering on the part of the parent, or I begin to have my



Overnight bag must-haves

- ✓ a blood glucose meter and extra batteries
- ✓ ketone test strips with instructions on how and when to use them
- ✓ glucose tablets, orange juice or whatever your child normally uses to treat low blood sugar
- ✓ insulin (unopened insulin should be packed in an insulated bag)
- ✓ extra syringes and insulin if your child uses a pump, in the event of a pump failure
- ✓ the personal data manager (PDM) if using a pump
- ✓ a charger for their continuous monitor
- ✓ glucagon kit (with instructions on how to use in case of a low blood sugar emergency)

own concerns – either about the parents’ capacity to handle it or because I don’t want to be a burden – I’ll offer to move the sleepover to my house.”

If the host bows out or an acceptable solution to your concerns can’t be worked out, Bookshester says it’s best to give your child an honest and empathetic response based on their maturity and feelings about having diabetes. “Rejection is always painful, but it’s also a part of life,” she says. “As with other chronic conditions, there are overnight camps for kids with diabetes all over the country. They can be a great alternative to hosting a sleepover or sending your child on one.” ■

TYPE 1

Choose *LOVE*

Julia Roosa, teacher and mum to a child with type 1, shares her story

▶▶ My husband and I traded our queen bed for a king-size about a year after our son was diagnosed with type 1.

These two developments might seem unconnected: one fairly insignificant (though we really love the bed), and the other utterly life-changing.

But there is a connection.

I'm a 47-year-old woman married 15 years to John. He's beefy, outdoorsy and often wears flannel. He's hardworking, funny and probably one of the nicest guys you'll ever meet. He turns 49 this December and works as the environmental educator and recycling director for our county. I teach classes at the

local community college. We have two kids, aged 10 and 11.

Diabetes joined our family five years ago. Our son, who was then five years old, had been acting unusually tired. One Sunday, overwhelmed by thirst, he guzzled so much water that his belly looked like an overfilled water balloon. We saw the doctor fast.

Since he was first diagnosed, our son's diabetes crawls into bed with us many nights. Not the son, just the disease. His continuous glucose monitor shrieks from his bedroom at midnight when his blood sugar is too low or too high. Our king-size bed is just big enough that one of us can respond to the alarm without waking the other. Other times, when we're both up, we find our way back to each other across

that landscape of a mattress.

It's hard enough as middle age creeps in to keep the fire lit. Add a chronic illness in the family, and you have all the makings of some serious distance. We do what we can to shrink that space. We share

a laugh, a look, or one of those moments at midnight. Through it all we keep on loving each other.

Diabetes has moved in with us, but we try not to let it get too comfortable.

We're still a family. John and I are still a couple. Sure, our lives can feel pretty crowded with this disease. It joins us at every meal, and rides along with us to every sporting event. It's in the room when we kiss the kids goodnight. But even a king-size bed can be cozy when you choose to stay in it together. ■



A man and a woman are smiling and looking down at a table filled with fresh fruits and vegetables. The woman is cutting a carrot on a plate. The man is standing next to her, with his hand on her shoulder. The table has several plates of food, including sliced carrots, apples, and green beans. The background is a bright, modern kitchen.

HOW TO
care for
yourself
WHEN YOUR CHILD
HAS DIABETES

Looking after a child with a chronic condition can take a toll on you, unless you're careful. *Susan McQuillan* has some advice to help you cope

▶▶ When your child has diabetes, you not only have all the normal parenting responsibilities, but also the added challenges of caring for a child with special needs.

"If you're not careful, that additional responsibility can be overwhelming," warns child and family therapist and blogger Meri Wallace.

"The stress will not only take a toll on your health, it can also affect the quality of family life."

But it doesn't have to be that way. These tips can help you regain control of your life.

Take care of your health

You must be in good physical and mental shape in order to provide the best care for your child, so take care of those important needs by eating well, exercising,

and seeing your own doctor or therapist for routine care. Learn to cut stress using deep breathing techniques and mind-body exercises such as yoga.

Get help with chores

To get the most household help from your spouse and other children, assign chores according to activities they would most enjoy, or are most willing to do. If your spouse likes to cook, put them in charge of dinner or preparing school lunches. If you have a neat freak in the family, hit them up for dish-washing and vacuuming. When you are the primary caregiver for a child with a chronic health condition, anything other people do around the house is helpful.

Don't reject offers of help

How often do you say "no thanks, I'm fine" when someone offers to help, while secretly wishing they'll ignore you and help out anyway? Letting someone drop off food or take your child out for an afternoon could save you from an otherwise overwhelming day. And if you need help, and no one is offering or available, consider ordering in a meal or hiring a cleaner, even if these are things you don't normally do. Consider it an investment in your sanity.

Keep your child informed

Share what you know about diabetes and allow your child as much responsibility for self-care as they can handle. As they grow up, you'll be faced with their need to do things their own way. "The more he understands the reasons for his treatments, the more cooperative he will be," Wallace adds. "And the more confidence you have in your child's ability to make healthy decisions, the less stress you feel."

Seek out support

Psychological stress not only affects you, it affects your child's moods, behaviour and quality of life in ways you may not recognise. If you need help coping, ask a doctor or trusted friend for a referral before caregiving gets the best of you. "You might also consider a support group," Wallace suggests. "Other parents dealing with the same issue can provide ongoing support, and keep you informed about new techniques for diabetes." Talk to your healthcare provider or local hospital for referral to a local group. For online help and information, try ParentingDiabeticKids.com and DiabetesResearch.org, and Facebook groups such as "Moms and Dads Of type one Diabetics."

EMPOWER YOURSELF WITH KNOWLEDGE

Learn everything you can about diabetes. The more you understand, the easier it will be to make decisions around diet, exercise, treatment, medication and self-care. Your child's health team

should offer lots of basic information, and online resources can help you understand the condition, stay updated and get new ideas. These include the Juvenile Diabetes Research Foundation, As1 Diabetes

and Diabetes Australia.

Also be sure your family understands the special needs of a child with diabetes and what to do in an emergency. And be mindful to share attention. "When one child is getting

more attention than the others, they might worry you love that child more," Wallace points out. "It's important to include the other children in the family or they might feel jealous, angry or left out." ■



Preventing

TYPE 2 DIABETES *in our kids*

Dr Kate Marsh
explains why good
health starts young,
with good habits



► Once referred to as 'maturity-onset diabetes', type 2 diabetes is no longer seen only in adults. Alongside increasing rates of childhood obesity, we are now seeing both children and adolescents being diagnosed with this condition.

Currently, young people still make up a very small proportion of the overall number of people with type 2. However, according to the Australian Institute of Health and Welfare, between 2002-03 and 2011-12 there were about 400 new cases of type 2 diagnosed each year among young people aged 10-24. So the numbers are not insignificant and should not be ignored.

WHO IS AT RISK?

Similarly to adults, both lifestyle factors and genetics can contribute to a child's risk of developing type 2 diabetes.

THE CHILDREN MOST AT RISK ARE THOSE WHO:

- Have a family history of type 2 diabetes
- Are overweight or obese
- Are physically inactive
- Have unhealthy eating habits
- Are of Aboriginal or Pacific Islander descent, or belong to other high-risk groups, such as Indian or Chinese descent

WHAT HAPPENS IF MY CHILD DEVELOPS TYPE 2 DIABETES?

Type 2 diabetes is often seen as less serious than type 1, but unfortunately, this isn't the case.





Regardless of the type or the treatment, diabetes is a serious health condition. Over time, high blood glucose levels can lead to other health concerns, including heart, kidney, eye and nerve problems, and the risk of developing these problems increases.

This means being diagnosed young is a real concern, as the chances of developing complications are higher, and they are more likely to develop earlier in life. In fact, studies have shown that young people with type 2 often develop diabetes-related complications earlier than those with type 1, and they commonly have multiple risk factors associated with both obesity and diabetes. Read Wayne Dansey's story on page 122 – he was diagnosed with type 2 at the age of 17, and is now facing

amputation of his lower left leg.

This is all the more reason to do what we can to prevent our children developing type 2.

THE HABITS THAT COUNT

● Provide and encourage healthy food choices

The 2014-15 National Health Survey found only one in 20 children aged 2-18 met the recommended guidelines for fruit and vegetable intake, suggesting there's plenty of room for improvement when it comes to eating habits. In addition to consuming more fruit and veg, other dietary recommendations for reducing diabetes risk include replacing refined grains with minimally processed wholegrains, limiting processed and red meat, eating more fibre-rich plant foods, and minimising added sugars. ➤

What can I do to reduce my child's risk?

The good news is that, unlike type 1 diabetes, there's a lot that can be done to reduce the risk of type 2. The key to prevention is targeting lifestyle factors that play a part in its development.

This is important for all children, but particularly for those at increased risk due to family history or ethnic background. Parents can help reduce a child's chances of type 2 by developing healthy lifestyle habits as a family. Healthy habits established early in life often continue into adolescence and adulthood, so starting early is important.



● **Prioritise (happy and screen-free) family meals**

Studies of children and adolescents have found that regular family meals and not watching television at meal times leads to better eating habits and a lower risk of childhood overweight or obesity. Positive family dynamics during meals have also been associated with a reduced risk of childhood obesity. While eating together isn't always possible in a busy household, aim for at least a few family meals each week, and ensure they are eaten at the table and not in front of the TV.

● **Encourage physical activity**

and reduce sedentary time. Regular exercise and less sitting time are both associated with a reduced risk of developing type 2 diabetes. Yet the 2014-15 National Health Survey found that, on average, Australian kids aged 5-17 spent about 1½ hours being physically active but more than two hours per day in front of a screen. And physical activity declined and screen time increased as they got older. There are many ways to get your children to be more active, including encouraging them to take up a team sport or activity they enjoy, limiting their screen time, and also being active as a family on weekends and during holiday periods.

● **Keep screens out of the bedroom.** According to the 2011-12 national health survey, almost half (44 per cent) of Australian children and young

Discourage sugar-sweetened drinks.

Regularly drinking sugar-sweetened drinks is associated with a significantly higher risk of childhood overweight/obesity and type 2 diabetes. If consumed at all, these are best kept for special occasions, and water should be encouraged as your child's main drink. Natural sparkling mineral or soda water with a slice of fresh lemon, lime or orange can provide a 'fancier' option for those who like it.

people (aged 2-17) had at least one screen-based item (such as a TV, computer or game console) in their bedroom. Among 15- to 17-year-olds, three-quarters had some kind of media in their bedroom, and those who did spent an average of two hours more a week watching or playing screen-based media compared with those without these items in their room.

● **Encourage good sleep habits.** Poor sleep has been linked with diabetes risk, and a study in healthy young adults of normal weight found that those who had a family history of type 2 diabetes and who had less

than six hours of sleep a night were more insulin resistant than those who had adequate sleep. Another good reason to keep screens out of the bedroom!

● **Address weight issues**

through making healthy lifestyle choices and by seeking professional help when needed. In the latest national health survey, more than one in four children aged 5-17 were overweight or obese. Weight is a major risk factor for type 2 diabetes in both children and adults, so preventing weight gain and managing excess weight is essential when it comes to reducing diabetes risk.

● **Be a good role model.**

Unfortunately, 'Do as I say, not as I do' isn't a good approach to encouraging healthy lifestyle habits in our kids. Instead, research has shown that family environments, particularly during early and middle childhood, help to shape our children's food preferences, patterns of food intake, eating styles, and the development of activity preferences and patterns – all of which can impact on their weight and health. So be sure to model the habits you'd like your kids to adopt, and make developing healthy lifestyle habits a family affair. The good news is that making these changes will not only reduce the risk of your child developing diabetes and other chronic diseases, it will also benefit the whole family. ■

Talk about the TOUGH STUFF

TYPE 1

Stacey Simms, broadcaster, blogger and mum of a child with type 1 diabetes

▶▶ At our back-to-school meeting before Year One, Benny's teacher admitted she was nervous about his diabetes. Mrs H told us she wasn't sure she wanted him in her class. It was a surprise – our daughter loved Mrs H, and she'd already agreed to teach Benny, too. So what happened?

Turns out Mrs H's daughter, a law student, wondered if Mrs H might be held responsible if anything went wrong.

As Mrs H talked about her fears, my face got warm. My heart pounded. I squirmed in the tiny classroom seat. We knew this teacher – a smart, wonderful woman who had challenged our daughter in the

best way. Had we finally run into something our son would miss out on because of diabetes?

Benny has lived 11 years with type 1. We're not perfect, but I wish I could go back and reassure my frightened self it wouldn't rule our lives. That Benny would play sport, be in the school play, and go on overnight trips without us.

In that classroom, my husband and I looked at each other, took a deep breath and dived in. We explained type 1 diabetes. We talked about legalities and safety. I felt myself getting defensive, angry and sarcastic, but I stayed calm as we went into educator mode.

In the end, Mrs H became one of our biggest allies. She welcomed Benny and pushed the administration to help. When the school had three

more kids with type 1 the next year, Mrs H worked to get an assistant who helped the kids manage. When another little boy in his grade was diagnosed, Benny was able to explain that school would still be a fun and welcoming place.

Through these experiences, and my podcast, *Diabetes Connections*, I've learned there's almost always a way around a roadblock – usually involving staying calm and educating. Is it tiring? Sure.

Sometimes I feel like a broken record. Still, I know I'm not just advocating for my own child, but for all kids with diabetes in the district.

It's tough, but it's worth it. ■





TYPE 2

THE *beginning* OF A NEW LIFE

Although **Wayne Dansey, 43,** is facing potential amputation of his lower left leg, he is also aware it will help to improve his quality of life in the long-term

►► When were you first diagnosed with diabetes?

I was diagnosed with type 2 in 1991 at the age of 17. At the time I weighed 140kg. My parents owned a family run milk bar so I spent a lot of time there eating junk food.

What has been your biggest self-management obstacle?

Losing weight and maintaining that weight loss – at my biggest I have weighed 186kg. Junk food is my biggest problem and my love of hot chips is a particular weakness. I used to eat six serves of hot chips a day. Now I have cut down to one serve a day and I no longer eat McDonald's for breakfast.

What kind of foot complications have you developed in recent years?

In 2012, I developed peripheral neuropathy, which meant that I couldn't feel anything in my feet. I also developed other complications in my left foot including charcot foot (where the bones weaken and the foot changes shape) and an ulcer that just won't heal and has required constant treatment. It has meant I have had to wear a special boot on my left foot and often use a knee scooter to get around instead of walking. Numerous times, my foot became so infected I was admitted to hospital. I have often had two to three medical

visits a week for treatment and for one period of 12 months, I had to see my GP every day to have the dressing changed.

You had a close call with complications in your foot before – how was your leg saved?

I first learned I might lose my left lower leg back in May 2014 when the ulcer was worsening and the doctor said, “I can’t see your foot coming back from this.” At first I just cried and cried. But a week later, the doctor was amazed how well I had healed up by just staying in bed in hospital and getting my foot dressed on a daily basis. Later that same year I spent 22 days in hospital with an infection in that left foot and they cut the foot completely open to remove it. Twice it looked like I would need to have my leg amputated but I was very lucky and the doctors ended up saving it.

You have now been told that you will need to lose your left leg. Has that been hard to accept?

Obviously I will feel very sad to look down and see my leg missing, but on the other hand

it could also be the beginning of a new life. It will be a relief not to be in chronic pain and have to go to the doctor constantly to have my foot dressed. I will be able to play ten pin bowls again and exercise again. It will be a big relief to walk without constant foot and leg pain and without limping or needing a knee scooter to move around. I used to work at the TAB and though I won’t be able to do that because it involves too much standing, I hope that maybe I can also return to working.

What will your operation involve?

I will be in hospital for a week after I have my ‘below the knee’ amputation. After my wound heals up I will go back and have a prosthesis fitted. I will then be transferred to The Royal Talbot Rehabilitation Hospital in Melbourne and spend up to four weeks there learning how to get round and manage on my own.

You have recently managed to lose weight – how did you do it?

I went to the weight control clinic at Austin

Health and followed their low-carb and low-fat ketogenic diet, which encompasses protein, shakes and small serves of protein and low-carb vegetables. I was also prescribed appetite suppressant medication, which has really helped to stop my carbohydrate and fast food cravings. I was 177kg when I first started this new eating plan in May 2016, and now I’m down to 116kg. I would like to get back down to 110kg. I have found that sticking to the diet is fairly easy. I have now finally got my diabetes self-management under control. My HbA1c used to be up around 11 but at my most recent reading it was 7.

Unfortunately, my weight loss has come too late to prevent my ulcer, but I’m hoping it will help to minimise my diabetes complications in the future. I really wish I had stopped eating junk food years ago and exercised to prevent gaining weight. If I had, I may not have ended up with so many serious complications in my feet. ■



YOU'RE FREE TO BE *fit*

► As early as she can remember, Louise Green fantasised about being a runner. But her lifestyle didn't fill the bill.

"I smoked, drank and ate crappy food," says the Canadian fitness trainer. "I'd go to the track, muster up one or two laps – and quit."

Desperate to lose weight, she cycled through failed diets, most of them ending in a discouraging binge. Green felt lost, alone and also trapped in a defeating cycle.

But she didn't quit. Instead, she signed up for a learn-to-run 5K clinic. When another curvy woman decked out in workout gear introduced herself as the group leader, Green's jaw dropped. She'd never seen someone who looked like her in the fitness field, much less a trainer.

Take a cue from one amazing curvy trainer, who ditched fitness ideals to unleash her inner athlete

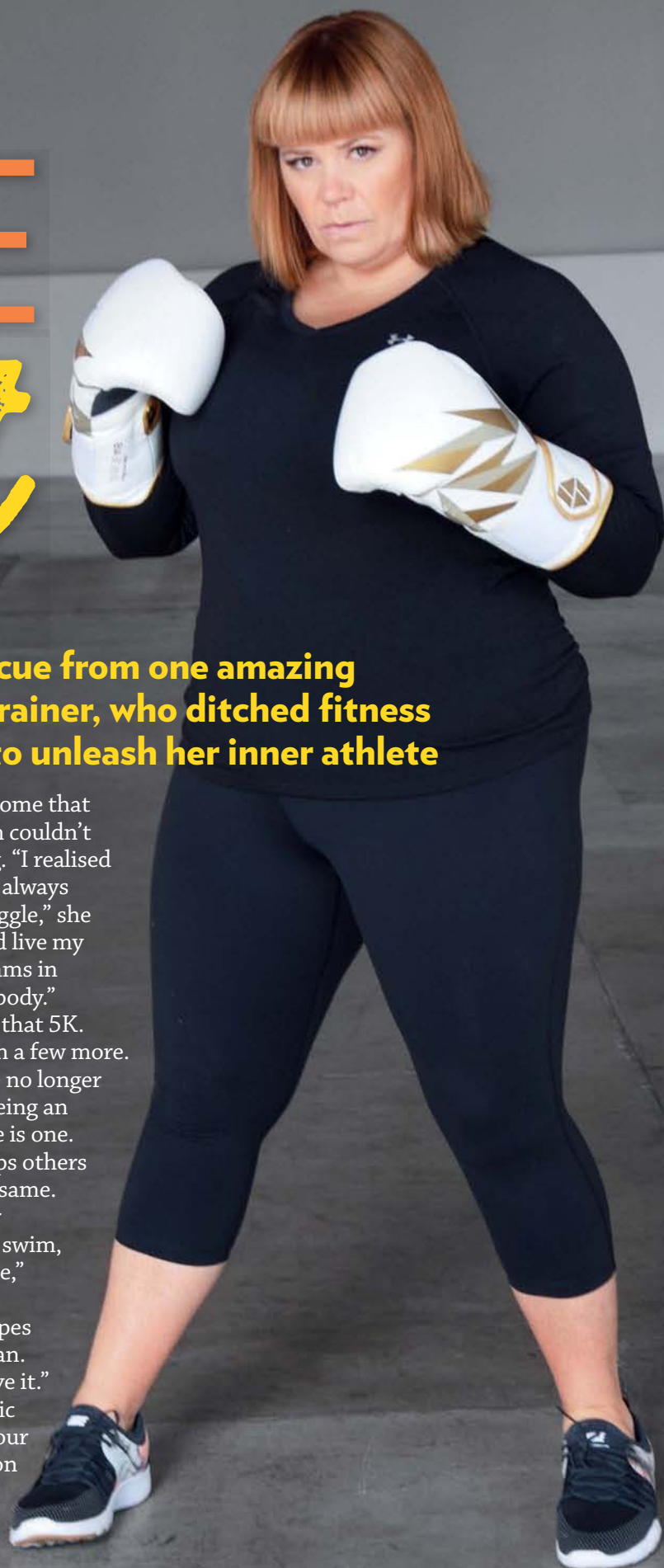
Heading home that night, Green couldn't stop smiling. "I realised that I didn't always have to struggle," she says. "I could live my athletic dreams in my current body."

Green ran that 5K. Then she ran a few more.

Today, she no longer dreams of being an athlete – she is one. And she helps others become the same.

"I train for triathlons. I swim, run and cycle," says Green. "Exercise wipes my head clean. I have to have it."

Got athletic dreams of your own? Read on for Green's top tips.



Find the joy!

1 Start slow

Too much too early leads to injury and burnout. Take an honest look at where you are now, and work your way up gradually. Walking is an excellent start, says Green. It's free and almost anyone can do it.

2 Inhabit your body

The pressure to be perfect is exhausting. So forget it. "There is no ideal body. Everyone is different – so let's celebrate that," she says. Focus on your own positive thoughts. Believe in yourself for exactly who you are.

3 Do what you love

Not sure what that is? Think back to childhood. If you loved to swim, revisit the pool. If dancing was your thing, try a Zumba class. Were you always on your bike? Hop back on.

4 Make time

"Scrolling the internet or watching TV? Replace some of that stuff with exercise," says Green. Put it on your calendar like you would a meeting.

5 Find your team

Surround yourself with strong friends who push and motivate you. Ask potential trainers "What does fitness look like to you?" "Can you give examples of exercises I'd do?" If you like what you hear, that's a good sign.

6 Get S.M.A.R.T.

"Approaching fitness without goals is like flopping in the wind," says Green. Make goals specific, measurable, attainable, realistic and timely (S.M.A.R.T.). An example: *I will walk a 5K next month with only two rest breaks.*

7 Buy good gear

If your clothing is uncomfortable, your workout will reflect that. Green's must-haves: a sports bra, compression leggings or pants with drawstrings, and properly fitted athletic shoes.

8 Fuel

Eat right. Before a workout, the trainer likes Greek yoghurt and fruit, natural peanut butter on wholegrain bread, or an apple with a handful of almonds.

9 Make it social

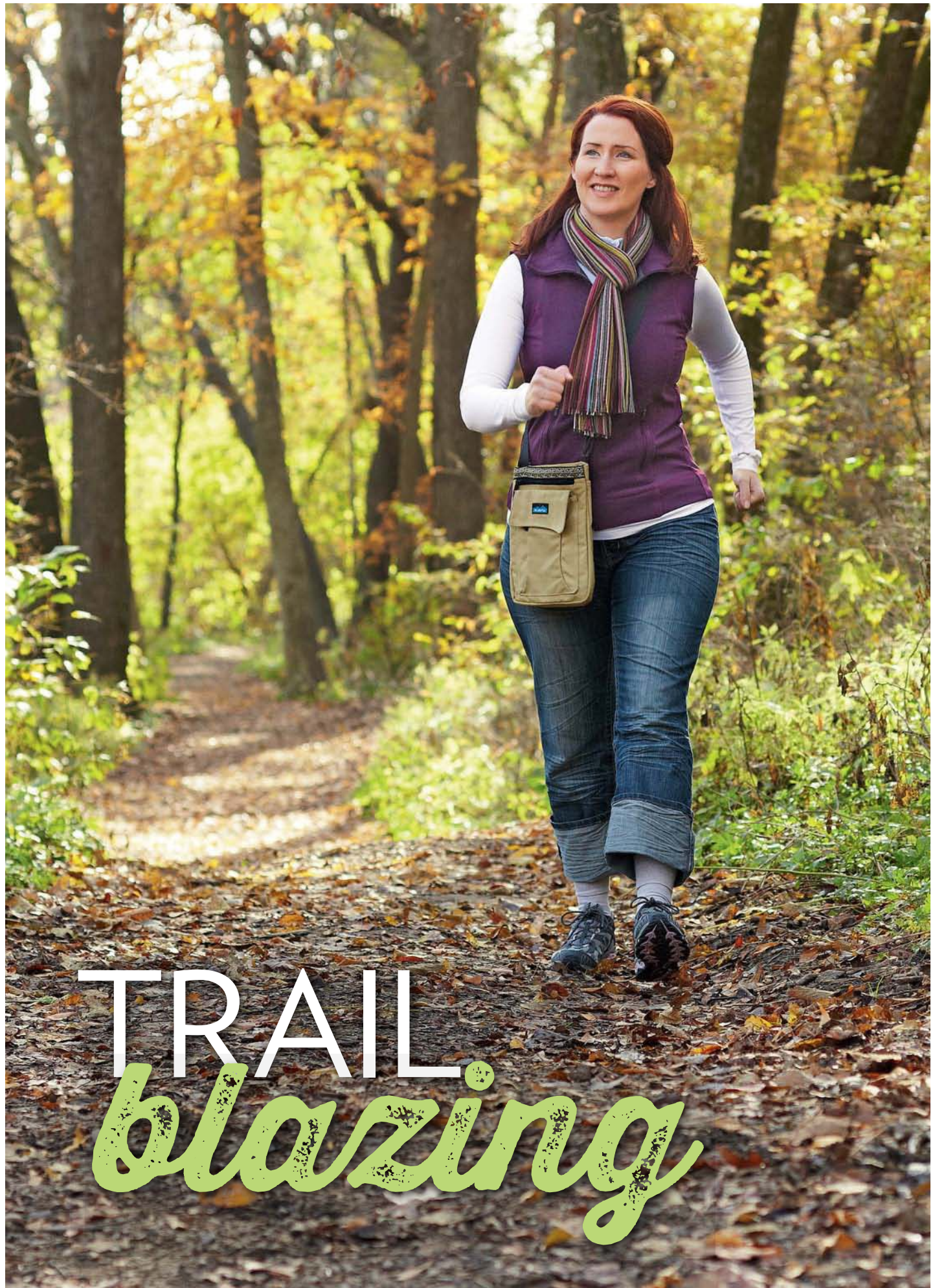
Exercising alone can be intimidating or plain boring – you're more likely to succeed with a buddy. Next time you grab coffee with a pal, take it to-go and hit the trails. Or do Zumba and dinner with friends.

10 Give yourself a chance

Getting started is the hardest part, so just go for it. "No greatness comes from easy things," says Green. "Walk through the fear and you'll be better for it."



Read more about Louise Green's journey in her book *Big Fit Girl* (Greystone Books, 2017). It's full of inspirational advice and actionable tips. RRP \$17.96, amazon.com.au ■



TRAIL
blazing

Enjoy the great outdoors and get an aerobic boost when you step off the footpath and onto a bush trail for your walking exercise.

▶ A new twist on your walking routine may help you feel more energised and offer the long-term weight management results you desire. Head off-road and start trail blazing! The intensity of the bush-walking experience (and the effect on your muscles) is enhanced because the ground surfaces and slopes vary. Bush walking is an invigorating and effective way to incinerate kilojoules and improve your aerobic fitness level. With a little forethought and easy preparation, you can continue walking outdoors during the cooler months of winter and continue to reap the benefits of fresh outdoor exercise.

TRAIL BLAZING BENEFITS

Aerobic fitness is the ability to engage in sustained physical activity using the large muscles of the lower body without feeling tired or winded. It reflects how well your heart and lungs work together to supply oxygen and fuel sources to your exercising muscles, heart, and body. As you increase your intensity level through the natural variations of the outdoor walking paths, you'll burn more kilojoules and improve your aerobic fitness at a far greater rate than on flat, paved footpaths. As a result the body's circulating insulin helps shuttle blood glucose into the working muscles to serve as fuel (instead of excess blood glucose causing damage to veins and organs or being stored as fat).



Pack your supplies (such as water, sunscreen, glucose and meds if needed), include some binoculars for nature watching, and opt for supportive and flexible, well-fitting shoes with good traction.

BEING PREPARED

Consider a pack to carry that should include a filled water bottle, sunscreen, insect repellent, a map and a mobile phone. If you are going out alone, leave a note with friends explaining your intended route. Be aware of pending inclement weather and pack accordingly.

COMFORT WEAR

Layer your clothes for both comfort and also weather protection. In tick country,

long sleeves and long pants are essential. Your base layer should wick sweat away from your body to keep skin dry. Look for performance fabrics such as Thermion, Thermax, polypropylene, Thinsulate, and silk rather than cotton. The middle layer serves as insulation; polar fleece or high-tech knit or wool is ideal and can be removed if you get too warm. The outer layer should be a waterproof and windproof breathable jacket. ➤



POLE LUNGES



Place both poles in front of your lead foot as you lunge, keeping your elbows flexed and chin parallel to the ground.



Bring your back leg forward, at the same time lifting the poles and smoothly moving them forward.



Step into the lunge and repeat on each foot 6–10 times for a set. Aim for three or four sets of lunges during your walk.



BASIC BUSH WALKING

Stand tall and erect. Step forward with one foot, landing toe-ball-heel, and pull your other foot through to take the next step.

Adding arms: Moving your arms as you step can increase the aerobic intensity of the workout by as much as 20 per cent. Move your arms in opposition to your legs with a slight bend at the elbows and relaxed hands. Continue to use your arms as you walk to help with gait and exercise intensity.

Front lunges: To increase the intensity of your walk, lengthen your stride – but only on terrain that can support long, sure strides. To really boost the kilojoule expenditure, take 6–10 forward lunges for every 150–300 metres you cover. This increases the muscle mass used and ups the intensity.

NORDIC WALKING

Pole walking, also called Nordic walking (opposite), is an effective, low-impact activity. It can increase the kilojoule expenditure by as much as 40 per cent compared with regular trail walking.

Pole technique: Keep your arms and shoulders relaxed. The lead pole should strike the ground parallel to your opposing foot; the back pole should point diagonally behind you as you push it back in a long, straight line. As you stride, ease your grip on the back pole handle and let the wrist straps help you bring the pole forward as you step onto the opposite foot.

Find a range of **walking trail** suggestions for various cities in the Travel section of broadsheet.com.au, or discover great walks of Australia on aussiebushwalking.com. Remember to also visit your local national parks and wildlife website to discover walking trails in parks, nature reserves and other conservation areas near you. ■

Feel better in 5

Big changes start with simple steps. Try these ideas to help you improve your wellbeing

1 DON'T WORRY, BE HAPPY

Even if you have the natural mindset of Eeyore, it's possible to transform into Tigger!

According to recent research, you can catch a good or bad mood from your friends. A study published in the journal *Royal Society Open Science* found of the 2194 students involved, those who had more happy friends were more likely to see an improvement in their moods over time. Research also found the relationships you have with others are more important than what you see in the mirror.

These are the people you should surround yourself with. Unlike the flu, happiness is a gift you can actually enjoy and benefit from.



2 KEEP YOUR FURRY FRIEND HAPPY & HEALTHY

More than 40 per cent of Aussie households own at least one dog, and more than 90 per cent of pet owners see their furry friend as a member of the family. With this close connection between animals and humans, research suggests that people who care for ill pets are more likely to have depression, anxiety and/or caregiving distress, which are similar symptoms to how you would feel when caring for sick relatives.

It is also reported these pet owners experience higher stress and a lower quality of life, than those who own healthy pets.

Through keeping your pal

happy and healthy you, too, can thrive from the benefits. Simply stroking your cat or dog is believed to lower your blood pressure, making you calmer – research shows even watching a fish swim can ease tense muscles. Further, in owning a pet you can't be a couch potato, especially with a dog! Playing increases your brain's feel-good chemicals (serotonin and dopamine) and makes you more social, as you're more likely to talk to strangers at the park who are also walking or playing with a pet.

With their unconditional love and wellbeing boost, pets also cut loneliness and isolation, increasing your health by providing 'ikigai' – a Japanese concept that loosely translates to 'having a reason to get out of bed each day'! ➤

Between 33 and 45
per cent of Australian
adults have poor
sleep patterns!

– Sleep Health Foundation

3 DRINK SAFELY

Many people enjoy an alcoholic drink or two, but drinking too much can be harmful to your health, both in the short and long term. However, when enjoyed in moderation, alcohol can be included as part of a healthy lifestyle for most.

DL dietitian Shannon Lavery shares her tips on how you can stick to the recommended alcohol intake:

- **Alternate your alcoholic drinks** with a non-alcoholic drink such as soda water, diet soft drink or plain old tap water.
- **Choose low-alcohol beverages** and swap for a smaller glass.
- **Dilute your drinks** with a non-alcoholic option.
- **Avoid joining 'rounds'**, as this often encourages drinking quickly.
- **Put your drink down** between sips and decline top-ups.
- **Nominate** at least two days each week that you will keep alcohol-free.



4 DON'T FORGET ABOUT ZZZS

Sleep is much more important than you realise – getting the right amount is vital for our attention span, reaction times, creativity and ability to solve a simple (or complex) problem when awake. Poor sleep patterns lead to fatigue and irritability and the inability to achieve the aforementioned, along with added stress on the body, which can lead to problems such as weight gain and higher blood glucose levels. Most adults (aged 18-64) require 7-9 hours of sleep daily to feel refreshed and function at their best, however, some people genuinely require less sleep, while others require more.

Sleeping helps us remember experiences during the day; for example, REM sleep is important for emotional memories (such as those that involve fear) and procedural memories (how to ride a bike), while slow-wave sleep is believed to help the brain reflect on 'declarative' memories (what you had for breakfast). In these processes the connections between the brain cells are strengthened, resulting in the brain selecting what memories are most important to keep.

STRUGGLING TO GET THOSE HOURS?

Avoid caffeine for at least four hours before bed, try yoga, meditation or read a book. Exercise daily, stick to a sleep schedule (even on weekends), ensure your room is free of noise and light, and avoid ebooks and electronic devices before bed – they emit blue light, which keeps you awake. If you still can't get to sleep, or are tossing and turning, perhaps get a new pillow or mattress with the correct support.



5

BOOST YOUR BRAIN

Dementia Australia reports more than 413,100 Australians live with dementia, and it is the second leading cause of death. You can increase resilience through activities that actively engage your brain.

STAY ACTIVE MENTALLY

Do crosswords, Sudoku, word games and puzzles, learn a musical instrument or language. Refine hand-eye ability through knitting, drawing and painting.

SOCIALISE REGULARLY

Catch up with friends or family, or volunteer — these will ward off depression and stress, which both contribute to memory loss.

EXERCISE DAILY

Physical activity increases your blood flow, especially to the brain. It can also be a social activity as well as aiding sleep. So aim for 2.5-5 hours of moderate-intensity physical activity or 1.25-2.5 hours of vigorous activity per week for adults. ■



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recipe index

DRINKS

- 74 Mixed berry smoothie ●

BREAKFAST

- 75 Baked bean, cheese and spinach toastie ●
 75 Coconut and fig porridge ●
 50 Egg and turkey scramble ●●
 75 Grapefruit, passionfruit & strawberry fruit salad ●
 63 Slow-cooker porridge with apples and walnuts ●

LIGHT MEALS, SNACKS & STARTERS

- 23 BBQ corn with herbed spread ●●
 45 Cauliflower salad with dill dressing ●●●
 57 Chargrilled vegetable and salad sandwich ●
 23 Chargrilled corn, avocado and tomato bruschetta ●●
 40 Chicken and broccoli salad with buttermilk dressing ●
 21 Corn, pumpkin and feta fritters ●●●●
 25 Corn, veggie and bacon muffins ●

- 24 Creamy crab and corn bites ●●
 44 Salmon and orange salad ●●
 42 Seared sesame tuna with fennel and apple slaw ●●
 46 Steak and chimichurri salad ●
 45 Warm potato and sprout salad with lemon vinaigrette ●●

MAINS

- 24 Chicken and corn nachos ●
 30 Chicken, semi-dried tomato and rocket pesto pasta ●
 65 Chicken souvlaki skewers
 55 Chilli con carne ●●
 55 Fireside fajitas ●
 55 Fish with smoked paprika and parmesan wedges
 30 Hummus, chargrilled vegetable and prawn pizza ●
 57 Italian sausage and veg tray roast ●●
 69 Jerk chicken with Caribbean rice ●
 70 Lebanese spiced lamb wraps with quinoa tabbouleh
 66 Maple-bourbon chicken with

- cheesy sweet potato ●
 56 Pan-roasted citrus salmon with grilled vegetables ●●
 25 Roasted eggplant, corn and parsley salsa with fish ●
 31 Roasted tomato and barley salad with poached egg ●
 61 Seared pork chops with apples and onions ●
 31 Vegetarian fried rice ●

SIDES & EXTRAS

- 52 Pan-roasted camp-fire vegies ●●●

DESSERTS

- 62 Apple and pomegranate galette ●
 38 Berry bread pudding ●●
 37 Chocolate espresso tart ●●
 35 Chocolate sticky date pudding ●●
 37 Classic sponge with jam and cream ●
 56 Peach cinnamon crumble ●
 55 Pineapple with honeyed yoghurt and granola ●
 38 Self-saucing passionfruit and coconut pudding ●●
 63 Spiced apple cake ●



KEY ● Freezable ● Gluten free ● Gluten-free option ● Vegetarian ● Lower carb

COOKING All our recipes are designed for a fan-forced oven. If you have a conventional oven, you'll need to increase the temperature by 10-20°C, depending on your oven. All recipes are tested in a 1000W microwave oven.

FREEZING Pack individual serves into airtight containers. Label with the recipe name and date. Main meals will generally freeze for three to six months, with three being optimal. To reheat, put the dish in the fridge overnight to defrost (never leave it on the bench overnight) or defrost on low/30% in the microwave. Reheat on the stove, in the oven, or microwave it on medium/50%, depending on the dish.

GLUTEN FREE When a recipe ingredient is tagged 'gluten free' it may either be branded gluten free or gluten free by ingredient – please check the label to ensure the product is suitable for you. **Note:** Some spices carry a 'may contain' statement. It is important to check the label of packaged products to ensure they are gluten free.

LOWER CARB When a recipe is tagged 'lower carb' it means it is less than 2 carb exchanges for a main or light meal and less than 1 carb exchange for a snack or dessert. This may be beneficial for people who are trying to control their type 2 with diet and/or medication. If you are on insulin and planning to follow a lower-carb diet, speak to your care team first.



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■ Does someone you know have diabetes?

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Alix

Alix Davis, **Editor**

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HURRY! ENDS APRIL 21, 2018

A *reality* CHECK



It's uplifting to see the power of people supporting others in the darkest times, says our resident type 1 columnist, Rob Palmer



After recently receiving a message from a distraught lady who had lost her 30-year-old brother due to T1 complications, I sat back and thought about how words delivered in a public arena

can affect people in such different ways.

While I discussed the merits of positive thinking and celebrated the advent of new technology that was increasingly reducing the negative effects of this relentless disease, and enabling those living with T1D to climb mountains, tackle obstacles and let nothing get in their way, there was a group of people amongst the T1D community in front of me who felt immense emotional pain.

They had lost a brother and a friend, and were there to come together and walk for a cure for the disease that had been so cruel. A young man had possibly made one mistake and happened to be alone at the time. Tragically, it cost him his life. For the tears I brought to those walking in support of his fight, I am sorry.

There is a fountain of positivity that can blur the lines between the aspirational and the realistic. I think it is important to be aware of the dark, morbid side of T1D. Yes, it can kill. Years of daily toil and maintenance, the constant battle to ensure normality, can seemingly be for nothing when one mistake costs so much. Yes, T1D can lead

to complications – including death – that would scare the pants off the bravest of people.

On the other side of dark is light, hope and determination. As important as it is to understand the risk, it is vital to hold up positive outcomes as a target to strive for. I have no medical background and not much more than an optimistic demeanour to offer, so I'd prefer the risk and downside of diabetes was info that came from professionals

with the credentials to back it up.

My role, as I see it, is to find and share the positive. Stories of challenges overcome, mistakes made that give way to learning and the times when I take great pleasure in telling T1D to “back off”. My words are never planned, aside from the will to express a good feeling and positive attitude.

The technology available now has opened my eyes to how far from ideal my management of diabetes must have

been as a young bloke. Considering hypos, hypers and what must have happened in my sleep, I may be lucky to be here at all. Insulin pumps and CGM now show us so much that, combined with diligence in attitude, mistakes and their potentially devastating consequences are being reduced daily.

I'll continue to be positive because the bulk of the T1D community tell me that it's reassuring, encouraging and helpful. Whether you are fearful, hurt, curious, determined, positive or a little of each, I think that an improved life and a cure for T1D are things that we all want to make a reality. ■



On the other
side of dark
is light, hope,
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